2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 752997

1. Entity Name

HOPEWELL BAPTIST CHURCH, INC.

FILED
Apr 17, 2000 8:00 am
Secretary of State
04-17-2000 90062 036 ****61.25

Principal Place of Business	Mailing Address
6001 S.STATE RD.39 PLANT CITY FL 33567	6001 S.STATE RD.39 PLANT CITY FL 33567-9714

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2011248 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WATKINS, E. C., JR. 2010 S. BUGG RD. PLANT CITY FL 33567	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P GREGORY, JOE 2218 TANGLEWOOD WAY BRANDON FL 33511	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BUGG, BETH 402 E. MCDONALD RD PLANT CITY FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S DURRANCE, MARTHA 3472 SILVERSTONE COURT PLANT CITY FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Myra Gregory 2218 Tanglewood Way Brandon, Fl. 33511	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HASTY, JOHN 4610 S.DRAWDY RD. PLANT CITY FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Joseph Carter 3406 Sam Astin Rd. Plant City, Fl. 33567	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD EVERS, LLOYD 7808 SOUTH S.R. 39 PLANT CITY FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WILLIS, HARRELL J 6002 SOUTH S.R. 39 PLANT CITY FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Beth Bugg BETH BUGG 4/5/00 813-737-3034
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #