2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 752997

1. Entity Name

HODEWELL BADTIST CHIECH INC



FILED Apr 11, 2003 8:00 am Secretary of State 04-11-2003 90135 019 ****61.25

HOPEWEL	L DAFTIST CHUNCH, INC.									
Principal Place of Business 6001 S.STATE RD.39 PLANT CITY FL 33567		Mailing Address 6001 S.STATE RD.39 PLANT CITY FL 33567			1					
2. Principal F	Place of Business	3. Mailing Address	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State		City & State	·		4. FEI Number			Applied For		
Zip	Country	Zip		Country		5. Certificate of			8.75 Ac	dditional
	C. Name and Address of Course	- Designation Agent	~- <i>-</i> -	رياد دريان آ	المتعادية	7 Name and A	ddress of New R			-
	6. Name and Address of Curren	r negistered Agent		Name		7. Name and A	doreas of New Y	icgisterea A	90	
WATEING	CEC ID									
WATKINS, E. C., JR. 2010 S. BUGG RD.				Street Address (P.O. Box Number is Not Acceptable)						
	ITY FL 33567			•						
FLAIN! O	111112 33307									
				City				FL	Zip Cor	de
8. The above	named entity submits this statement f	for the purpose of changing	its reaister	ed office or r	reaistere	ed agent, or both,	in the State of Flo	orida. I am fa	amiliar with	n, and accept
	tions of registered agent.									
: .										
SIGNATURE										
	Signature, typed or printed name of registered ager	nt and title if applicable. (Ne	OTE: Registere	ad Agent signatur	e required	when reinstating)		DATE		
	FILE NOW: FEE IS \$61.25	9. Election C			7	\$5.00 May Be		ke Check		
		Trust Fund	a Contribut	lion. L	J	Added to Fees	Fioric	da Depart	ment of	State
10.	OFFICERS AND D	HRECTORS	11.			ADDITIONS/CHAP	NGES TO OFFICE	RS AND DIR	ECTORS I	N 10
TITLE	TD	. Delete	TITL						Change	
NAME	BUGG, BETH		NAM	AE						
STREET ADDRESS	402 E. MCDONALD RD		STR	EET ADDRESS						
CITY-ST-ZIP	PLANT CITY FL		CITY	Y-ST-ZIP						
TITLE	\$ 4,	▶ Delete	TITL	.E	S		•		Change	- 🔲 Addition
NAME	GREGORY, MYRA		NAM	//E	5 h	ella L	عاباه			
STREET ADDRESS	2218 TANGLEWOOD WAY			EET ADDRESS	410	DE OID	Malper	ery Rd		_
CITY-ST-ZIP	BRANDON FL 33511		CIL)	Y-ST-ZIP	PIG	INT CITY	<u>/,FL 3</u>	3567		
TITLE	P	☐ Delete	TITL			,			☐ Change	Addition
NAME	CARTER, JOSEPH		NAM							
STREET ADDRESS	3406 SAM ASTIN RD			EET ADDRESS Y-ST-ZIP						
CITY-ST-ZIP	PLANT CITY FL 33567								☐ Change	Addition
TITLE	EVERS, LLOYD	Delete	TITL NAM	1					change	Audition
NAME STREET ADDRESS	7808 SOUTH S.R. 39			EET ADDRESS						
CITY-ST-ZIP	PLANT CITY FL			Y-ST-ZIP						
TITLE	D	☐ Delete	TITL	.E +				.=	☐ Change	Addition
NAME	PEEPLES, LARRY		NAM	1						
STREET ADDRESS	560 OLD WELCOME ROAD			EET ADDRESS						
CITY-ST-ZIP	LITHIA FL 33547		CITY	Y-ST-ZIP						
TITLE		☐ Delete	TITL	.E [-		☐ Change	Addition
NAME			NAN	1						
STREET ADDRESS		V ₂₀ .		EET ADDRESS						
CITY-ST-ZIP	1			Y-ST-ZIP						
40	certify that the information supplied wi	th this filing dose not qualify	for the eve	emption etate	ad in Se	ction 119 07(3)(i).	Florida Statutes	I further cert	ify that the	· information

Thereby Jernity that the mormation supplied with this mining does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. Further certify that his 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: