


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

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90236 022 ****61.25

DOCUMENT # 765448

1. Entity Name
FIRST BAPTIST CHURCH OF GARDEN CITY, INC.



Principal Place of Business
**3140 HASKELL-LANGLEY ROAD
CRESTVIEW FL 32539-9142**

Mailing Address
**3140 HASKELL-LANGLEY ROAD
CRESTVIEW FL 32539
US**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

City & State

Zip Country Zip Country

4. FEI Number **59-2382505**

Applied For
Not Applicable

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



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**GARRETT, BEVERLY
6165 BETHANY DR
CRESTVIEW FL 32539**

7. Name and Address of New Registered Agent

Name **Mr. Tony A. Rowan**

Street Address (P.O. Box Number is Not Acceptable)
3116 Big O's Green Acres Drive

City **Crestview** State **FL** Zip Code **32536**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Tony A. Rowan* DATE **4-22-03**

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

FILE NOW: FEE IS \$1.25

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00 May Be Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

| | | |
|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD GARRETT, BEVERLY 6165 BETHANY DR CRESTVIEW FL 32539-7259 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD BAGGETT, RALPH 3179 BAGGETT LANE CRESTVIEW FL 32539 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD PITTS, ED 3983 BAMBI DRIVE CRESTVIEW FL 32539 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD Rowan, Tony 3116 Big O's Green Acres Drive Crestview FL 32536 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> 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: *Tony A. Rowan* **REQUIREDA. ROWAN** DATE: **4-22-03** **689-6654**

CR2E037 (10/02)