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

## Jan 13, 2003 8:00 am Secretary of State DOCUMENT # C9400000006 01-13-2003 90409 034 \*\*\*\*61.25 NORWOOD BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 1818 - 29TH AVE. NORTH 1818 - 29TH AVE. NORTH ST. PETERSBURG FL 33713 ST. PETERSBURG FL 33713 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-0782454 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BONER, ERNEST E Street Address (P.O. Box Number is Not Acceptable) 2801 28TH ST. NORTH ST. PETERSBURG FL 33713 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. I am familiar with, and accept the obligations of registered agent. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD TITLE ☐ Delete TITLE ☐ Change Addition NAME BONER, ERNEST E NAME STREET ADDRESS 2801 28TH ST. NORTH STREET ADDRESS CR2E037 CITY-ST-7IP ST. PETERSBURG FL 33713 CITY-ST-ZIP TITLE W Delete TITLE ☐ Addition ☐ Change MASAREK, STEVEN STREET ADDRESS 860 28TH AVENUE NORTH STREET ADDRESS CITY-ST-7IP ST. PETERSBURG FL 33713 CITY-ST-ZIP TITLE SD Delete ☐ Change ■ Addition NAME WEESE, CARROLL STREET ADDRESS 2561 - 32ND AVE, NORTH STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 33713 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME

12. Thereby certify that the information supplied with this filling 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

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED