## **2002 UNIFORM BUSINESS REPORT (UBR)**

changed, or on an attachment with

SIGNATURE:

## Mar 11, 2002 8:00 am **DOCUMENT # N0100007813** Secretary of State GLORY BAPTIST CHURCH, INC. 03-11-2002 90030 038 \*\*\*\*61.25 Principal Place of Business Mailing Address 39330 US HWY 19 39330 US HWY 19 TARPON SPRINGS FL 34689 TARPON SPRINGS FL 34689 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Numbe Applied For City & State City & State 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 Street Address (P.O. Box Number is Not Acceptable) COOK, JERRY 39330 US HWY 19 TARPON SPRINGS FL 34689 Zip Code FL 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 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: REE IS \$61.25 П Trust Fund Contribution. Added to Fees **Department of State** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 .1/0. 11. ☐ Addition TITLE TRUSTEE ☐ Delete TITLE NAME LARRY JACKSON NAME 2654 RIDGE LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PAIM HARBOR, FL 34683 Delete TITLE [] Change ☐ Addition TITLE TRUSTEE NAME ANTHONY KILLIAN NAME 552 CYPTLOSS ST. STREET ADDRESS STREET ADDRESS TAMPON SPRINGS, FC 34689 CITY-ST-ZIP CITY-ST-ZIP [] Change TITLE" ಞ್ಯ : ∙⊡ .Delete ☆ TITLE . Addition RICHARD WOODMAN NAME NAME 39 DRUPY LAND STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MAN SPRINGS 34689 CITY-ST-ZIP [] Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP [] Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing gloes 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 suppliemental leport is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empty specific execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

1/30/02 727- 438 791

FILED