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

Aug 27, 2003 8:00 am Secretary of State DOCUMENT # N01000008923 1. Entity Name 08-27-2003 90078 016 ****61.25 NEW SALEM BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 3478 KYNESVILLE HIGHWAY 3476 KYNESVILLE HIGHWAY MARIANNA FL 32448 MARIANNA FL 32448 2. Principal Place of Business 3. Mailing Address Suite. Apt. #. etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For 4. FEI Number 59-2399161 City & State City & State Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent FORAN, SUE Street Address (P.O. Box Number is Not Acceptable) 3478 KYNESVILLE HIGHWAY MARIANNA FL 32448 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 ... DATE Signature, typed or printed name of registered agent and title if applicable 12. 45 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State After September 10, 2003, min will be \$236.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Change ☐ Addition TITLE TITLE ☐ Delete BAXLEY, BILLY NAME NAME 3245 KYNESVILLE HIGHWAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Marianna FL 32448 ☐ Addition TITLE ☐ Change ☐ Delete REHBERG. VERA MAE NAME NAME 3290 KYNESVILLE HIGHWAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MARIANNA FL 32448 ST _ _______ Change ☐ Addition ☐ Delete TITLE TITLE FORAN, SUE NAME NAME 2239 FAIRVIEW ROAD STREET ADDRESS STREET ADDRESS CITY-ST-7IP MARIANNA FL 32448 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE HENDERSON, C W NAME NAME 2632 HENDERSON ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP COTTONDALE FL 32431 ☐ Change Addition ___ Delete TITLE TITLE REHBERG, SHIRLEY NAME NAME STREET ADDRESS 3290 KYNESVILLE HIGHWAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MARIANNA FL 32448 Change Addition 🗶 Delete TITLE TITLE BEVAN, TOM NAMÉ NAME STREET ADDRESS 3478 KYNESVILLE HIGHWAY STREET ADDRESS

12. I hereby 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 changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

MARIANNA FL 32448

CITY-ST-ZIP

ZHOWAT YOURED !

8/25/03 850-482-2285

FILED