

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

**FILED**  
**Feb 12, 2003 8:00 am**  
**Secretary of State**

02-12-2003 90126 005 \*\*\*\*61.25

DOCUMENT # **N02000006150**

1. Entity Name  
**WATERS EDGE BIBLE CHURCH, INC.**



Principal Place of Business  
**1043 29TH STREET N.W.  
WINTER HAVEN FL 33881**

Mailing Address  
**1043 29TH STREET N.W.  
WINTER HAVEN FL 33881**



2. Principal Place of Business  
**2718 Ave U N.W.**

3. Mailing Address  
**2718 Ave. U N.W.**

Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State  
**Winter Haven, Fla.**

City & State  
**Winter Haven, Fla.**

4. FEI Number **47-0881286** Applied For  
**47-0881286** Not Applicable

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

Zip Country  
**33881 U.S.**

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6. Name and Address of Current Registered Agent  
**FARRER, KENNETH L  
1043 29TH STREET N.W.  
WINTER HAVEN FL 33881**

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** 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 *Kenneth L. Farrer* **Pres.** DATE *1/9/03*  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE <b>P</b>	<input type="checkbox"/> Delete <b>FARRER, KENNETH L 1043 29TH STREET N.W. WINTER HAVEN FL 33881</b>	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>S</b>	<input type="checkbox"/> Delete <b>FARRER, DIANE W 1043 29TH STREET N.W. WINTER HAVEN FL 33881</b>	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>D</b>	<input type="checkbox"/> Delete <b>Keyt Tom 46 NE 9th St Mulberry, FL 33860</b>	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<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: *Kenneth L. Farrer* **1/9/03** **863 967-0083**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/02)