

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N02049

1. Entity Name

CENTRAL BAPTIST CHURCH OF SANFORD, FLORIDA, INC.

FILED
Apr 03, 2000 8:00 am
Secretary of State

04-03-2000 90142 001 ****61.25

Principal Place of Business

Mailing Address

3101 WEST FIRST STREET
SANFORD FL 32771

3101 W STATE RD 46
SANFORD FL 32771-8844

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1499968

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~BARKER, TED~~
~~309 FAIRWAY RD~~
~~SANFORD FL 32773-4711~~

Name

Owen, Jack

Street Address (P.O. Box Number is Not Acceptable)

5855 S. Sylvan Lake Drive

City Sanford

FL

Zip Code 32771-9038

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

Jack Owen, President of Trustees

3-28-00

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME YATES, EVELENA
STREET ADDRESS 5520 WILSON ROAD
CITY-ST-ZIP SANFORD FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME BARKER, TED
STREET ADDRESS 309 FAIRWAY RD
CITY-ST-ZIP SANFORD FL 32773

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME AUSTIN, PATRICIA
STREET ADDRESS 420 KIMBERLY CT
CITY-ST-ZIP SANFORD FL 32771-9717

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME OWEN, JACK
STREET ADDRESS 5855 S SYLVAN LAKE DR
CITY-ST-ZIP SANFORD FL 32771-9038

TITLE ☒ Change ☐ Addition
NAME Owen, Jack
STREET ADDRESS 5855 S. Sylvan Lake Drive
CITY-ST-ZIP Sanford, FL 32771-9038

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Bills, Dick
STREET ADDRESS 400 Geronimo Court
CITY-ST-ZIP Lake Mary, FL 32746-5124

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Miller, Linda
STREET ADDRESS 515 Power Road
CITY-ST-ZIP Sanford, FL 32771-9506

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jack Owen

President of Trustees 3-28-00 (407) 322-2914

Date

Daytime Phone #

CR2F037 (9/99)