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

DOCUMENT # N08424

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FILED Jan 09, 2003 8:00 am § Secretary of State

FIRST B	APTIST CHURCH OF DUNED	IN INC.			01-09-2003 90082 03	0 ****6	1.25	
500 WOOD ST 500		Mailing Address 500 WOOD ST DUNEDIN FL 34698 US	00 wood st Dunedin Fl 34698					
2. Principal	l Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. FEI Number 59			Applied For	
Zip	Country	Zip	Country	5. Certificate of Sta	utus Decired	8.75 Ac	lot Applicable ditional	
	6. Name and Address of Current	Registered Agent		7. Name and Addr	ess of New Registered A	ee Requir		
			Name					
賽 500 WO	R, DANIEL DOD STREET		Street Addre	Street Address (P.O. Box Number is Not Acceptable)				
POMEDI	N FL 34698		City	<u> , ,</u>	FL	Zip Coo	to.	
SIGNATURE	Signature, typed or printed name of registered agent FILE NOW: FEE IS \$61.25	9. Election Car	E: Registered Agent signature red	quired when reinstating) \$5.00 May Be	DATE Make Check		to	
		Trust Fund C	Contribution.	Added to Fees	Florida Departn			
TITLE	OFFICERS AND DIF		11.	ADDITIONS/CHANGES	S TO OFFICERS AND DIRE	CTORS IN	l 10	
NAME Street Address City-St-Zip	SHUMAN, LOYAL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP]	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MORGAN, TERRY	□ Delete	-					
	CLEARWATER FL 33764		TITLE NAME STREET ADDRESS CITY-ST-ZIP		[☐ Change	☐ Addition	
NAME STREET ADDRESS	CLEARWATER FL 33764 DT BETHEL, DORIS J 2538 BRAMBLEWOOD DR E CLEARWATER FL 33763	□ Delete	NAME STREET ADDRESS			Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	CLEARWATER FL 33764 DT BETHEL, DORIS J 2538 BRAMBLEWOOD DR E		NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CLEARWATER FL 33764 DT BETHEL, DORIS J 2538 BRAMBLEWOOD DR E CLEARWATER FL 33763 TT COMPTON, SAM 706 ROBIN AVE	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			☐ Change	☐ Addition	

In 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 changed, or on an attachment with an address, with all other like empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if Bethel

SIGNATURE:

Jan 6, 2003