FILED

## 2001 UNIFORM BUSINESS REPORT (UBR)

## Apr 30, 2001 8:00 am § Secretary of State **DOCUMENT # N10434** 1. Entity Name BIBLE BAPTIST CHURCH OF MANDARIN, FLORIDA, INC. 4-30-2001 90428 010 \*\*\*\*70.00 Principal Place of Business Mailing Address 4211 JULINGTON CREEK RD 4211 JULINGTON CREEK RD . . . . . . . . JACKSONVILLE FL 32223 JACKSONVILLE FL 32223 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2566988 Not Applicable Zip Country 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 Name Street Address (P.O. Box Number is Not Acceptable) PIETRYLO, ANDREW J. 11237 STONEY POINT LANE, EAST JACKSONVILLE FL 32257 City 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. CR2E037 (10/00) TITLE ☐ Delete TITLE ☐ Change Addition PIETRYLO, ANDREW J. NAME STREET ADDRESS STREET ADDRESS 11237 STONEY PT LN E CITY-ST-ZIP CITY-ST-ZIP Jacksonville Fl. 32257 TITLE TD ☐ Delete TIT1 F ☐ Chapne ☐ Addition ROSS, DENWOOD F NAME STREET ADDRESS STREET ADDRESS 1401 STARLIGHT CT CITY-ST-ZIP CITY-ST-ZIP FRUIT COVE FL 32259 Change TITLE ☐ Delete TITLE Addition TUNNING, JACKIE L NAME 208 Crooked Court STREET ADDRESS 2156 FOREST HOLLOW WAY STREET ADDRESS fruit Cove, FL 32259 CITY-ST-ZIP CITY-ST-ZIP FRUIT COVE FL TITLE ☐ Delete TITLE **X** Change ☐ Addition NAME DRUM, RICHARD STREET ADDRESS STREET ADDRESS 2704 CHELSEA COVE CIR CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32223 Delete Addition D TITLE Change TITLE Mark Comer 1540 Beluthahatchee Road NAME JOHNSON, DAVID A. NAME STREET ADDRESS STREET ADDRESS 3917 ENGLISH COLONY DR N. CITY-ST-ZIP CITY-ST-ZIP Fruit Cook, FL 3225 JACKSONVILLE FL 32257 Delete TITLE TITLE Change ☐ Addition NAME NAME COMER, JAMESS STREET ADDRESS STREET ADDRESS 25. STATE ROAD B03 CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32259

12. Thereby 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.

Denwood F. Ross April 22, 200,