

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

FILED
Apr 09, 2003 8:00 am
Secretary of State

04-09-2003 90142 037 ****61.25

DOCUMENT # N11796

1. Entity Name
**MT. CALVARY FIRST BAPTIST CHURCH OF SOUTH BAY, I
NC.**



Principal Place of Business
**180 SW 10TH AVE
SOUTH BAY FL 33493**

Mailing Address
**180 SW 10TH AVE
SOUTH BAY FL 33493**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **06-0212160**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CHILDS, WILLIE MACK
225 SW 10TH AVE
SOUTH BAY FL 33493**

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

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

(NOTE: Registered Agent signature required when reinstating)

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Delete
NAME **COOPER, ROOSEVELT**
STREET ADDRESS **660 W 37TH ST**
CITY-ST-ZIP **RIEIRA BEACH FL**

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

TITLE **TD** ☐ Delete
NAME **CHILDS, WILLIE MACK**
STREET ADDRESS **225 SW 10TH AVE**
CITY-ST-ZIP **SOUTH BAY FL**

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

TITLE **SD** ☐ Delete
NAME **WITCHARD, BETTY (FINAN)**
STREET ADDRESS **250 SW 7TH AVE**
CITY-ST-ZIP **SOUTH BAY FL**

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

TITLE **SD** ☐ Delete
NAME **CHILDS, LEXIE M (RODING)**
STREET ADDRESS **225 SW 10TH AVE**
CITY-ST-ZIP **SOUTH BAY FL**

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

TITLE **D** ☐ Delete
NAME **ROKER, BERTHA M**
STREET ADDRESS **185 SW 10TH AVE**
CITY-ST-ZIP **SOUTH BAY FL**

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

TITLE **D** ☐ Delete
NAME **LEWIS, PAULINE**
STREET ADDRESS **260 NW 12TH AVE**
CITY-ST-ZIP **SOUTH BAY FL**

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

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:

Rev. Roosevelt Cooper, Pastor
(561) 842-7587

CR2E037 (10/02)