

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

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90512 045 ****61.25

DOCUMENT # N12130

1. Entity Name

GARDEN CITY BAPTIST CHURCH, INC.



Principal Place of Business

**3139 ARMSDALE RD
JACKSONVILLE FL 32218**

Mailing Address

**P.O. BOX 26400
JACKSONVILLE FL 32225-6400**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2244746**

Applied For

Not Applicable

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

**HARPER, SHERRY L *
14137 PINE ESTATES DR
JACKSONVILLE FL 32218**

Name

Dena Pate

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

4867 Stratton Road

City

Callahan, FL

FL

Zip Code

32011

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

Dena J. Pate

01-15-03

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 **PD** ☐ Delete
NAME **JEWELL, WALLACE**
STREET ADDRESS **16173 BLYLER RD**
CITY-ST-ZIP **JACKSONVILLE FL**

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

TITLE **T** ☒ Delete
NAME **GOFF, LINDA**
STREET ADDRESS **RT 3 BOX 848**
CITY-ST-ZIP **CALLAHAN, FL 32011**

TITLE **T** ☒ Change ☐ Addition
NAME **Donna Bratcher**
STREET ADDRESS **5883 Copper Creek Dr.**
CITY-ST-ZIP **Jacksonville, FL 32218**

TITLE **D** ☐ Delete
NAME **BRATCHER, CHARLES**
STREET ADDRESS **5883 COPPER CREEK DR**
CITY-ST-ZIP **JACKSONVILLE FL 32218**

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

TITLE **FS** ☒ Delete
NAME **HARPER, SHERRY L**
STREET ADDRESS **2737 DUNN AVE**
CITY-ST-ZIP **JACKSONVILLE FL 32218**

TITLE **FS** ☒ Change ☐ Addition
NAME **Pate, Dena J.**
STREET ADDRESS **4867 Stratton Rd**
CITY-ST-ZIP **Callahan, FL 32011**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Dena J. Pate

01-15-03

904-768-9447

CR2E037 (10/02)