## **2002 UNIFORM BUSINESS REPORT (UBR)**

## FILED Jan 31, 2002 8:00 am Secretary of State **DOCUMENT # N12968** 1. Entity Name FIRST BAPTIST CHURCH OF BAREFOOT BAY, INC. 01-31-2002 90094 031 \*\*\*\*61.25 Principal Place of Business Mailing Address 303 BAREFOOT BOULEVARD. 303 BAREFOOT BOULEVARD BAREFOOT BAY FL 32976 BAREFOOT BAY FL 32976 2. Principal Place of Business 3. Mailing Address Th. 器成了是 高层。 -DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4.73.33 DSC31 City & State City & State 4. FEI Number Applied For 59-2658401 Not Applicable Zip 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) **GRIFFITHS, ROBERT 408 N PAPAYA CIRCLE BAREFOOT BAY FL 32976** 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. ROBERT GRIFFITHS, CHAIRMAN, Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. A Delete XX Change TITLE TITLE Treasurer M Addition FRUSCELLAXJOSERHXX NAME NAME Marie Schmitt HOREX KATANIXXXXXXX STREET ADDRESS STREET ADDRESS 710 E. Thrust Cricle CITY-ST-ZIP BAREFOOT BAY FL 329X6 CITY-ST-ZIP Barefoot Bay, FL 32976 TITLE XXI Change ☐ Addition TITLE **y** Delete TOHNEON×TOHNINXX NAME NAME Richard Schmitt BOX XX SEAGULIX EIRIEKEX STREET ADDRESS STREET ADDRESS 710 E. Thrush Circle CITY-ST-ZIP CITY-ST-7IP DAREFIXOTE BAYERS 320X6 Barefoot Bay, FL ☐ Delete ☐ Change ☐ Addition TITLE TITLE SMITH, DON NAME NAME 1132 W BARFOOT CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BAREFOOT BAY FL 32976 TITLE ☐ Delete TITLE Change Addition HYMAN, FANSELOW NAME NAME 7675 GREAT BEAR LAKE DR. SNUG HARBOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SEBASTIAN FL CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition Griffiths, Robert NAME NAME STREET ADDRESS 408 N PAPAYA CIRCLE STREET ADDRESS CITY-ST-ZIP **BAREFOOT BAY FL 32976** CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME Craigie, Robert NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

717 N. OLEANDER CIRCLE

BAREFOOT BAY FL

STREET ADDRESS

CITY-ST-ZIP

/Ears SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert D. Kassner Deacon Chairman

Date

(561) 664-1040

Daytime Phone #