## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED DOCUMENT # N13018** May 10, 2000 8:00 am 1. Entity Name Secretary of State COMMUNITY BIBLE CHURCH OF BROOKSVILLE, INC. 05-10-2000 90099 024 \*\*\*\*70.00 Principal Place of Business Mailing Address 1350 PONCE DE LEON BLVD P. O. BOX 10017 PO BOX 10017 BROOKSVILLE FL 34601 BROOKSVILLE FL 34603-0017 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3093711 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) BROWN, CARL 1350 PONCE DE LEON BLVD. **BROOKSVILLE FL 34601** City Zip Code FI 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE Make Check Payable to **FILE NOW:** 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Change ☐ Addition TITLE ☐ Delete TITLE BROWN, CARL NAME NAME 29249 WILPAYNE RD. STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **BROOKSVILLE FL** ☐ Change Addition TITLE Delete TITLE BALOGH, WILLIAM NAME NAME STREET ADDRESS STREET ADDRESS 2319 ENDSLEY ROAD CITY-ST-ZIP CITY-ST-ZIP **BROOKSVILLE FL** Addition ☐ Change TITLE ☐ Defete TITLE BRAZINSKI, BRUCE NAME NAME STREET ADDRESS STREET ADDRESS 27068 WAKEFIELD DRIVE CITY-ST-ZIP CITY-ST-ZIP Brooksville fl Change ☐ Addition TITLE D ☐ Delete TITI F NAME PRITZ, KENNETH 710 FERNWOOD DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-7IP **BROOKSVILLE FL** CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE SMITH, JAMES H. NAME NAME STREET ADDRESS STREET ADDRESS 26111 CHURCH ROAD CITY-ST-ZIP CITY-ST-ZIP **BROOKSVILLE FL** ☐ Delete TITLE ☐ Change ☐ Addition TITLE SINGER, CHARLES NAME NAME 23244 SINGER LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BROOKSVILLE FL** 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 feport as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

FURE: USULUM COESOLUM DINITION A. Balogh 4-28-00 (352) 799-5463

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

changed, or on an attachment with an address, with all other like empo