

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N13979

1. Entity Name

FIRST BAPTIST CHURCH OF FOUNTAIN, FLORIDA, BAY COUNTY, INC.

Principal Place of Business

Mailing Address

18906 HWY. 231
P O BOX 349
FOUNTAIN FL 32438
US

18906 HWY. 231
P O BOX 349
FOUNTAIN FL 32438
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DEGROFF, STEVEN
16130 SANDSTONE ROAD
FOUNTAIN FL 32438

Name Hervey Degroff
Street Address (P.O. Box Numbers Not Acceptable)
18507 Hwy 231
City Fountain FL Zip Code 32438

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

Hervey Degroff
(NOTE: Registered agent signature required when installing)

8-18-02
DATE

After September 13, 2002, min. will be \$236.25.

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	C KAULBACH, GEORGE 11920 JASMINE ST. FOUNTAIN FL 32438	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C DEGROFF, STEVEN 16130 SANDSTONE RD FOUNTAIN FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DAVIS, DENNIS 19711 DEEP SPRINGS RD FOUNTAIN FL 32438	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HAZELIP, HAROLD 17931 PARK PL FOUNTAIN FL 32438	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BELL, MARK 4116 SINGER RD FOUNTAIN FL 32438	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DEGROFF, DAWN 16130 SANDSTONE RD. YOUNSTOWN FL	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dennis Davis 19711 Deep Springs Rd Fountain FL 32438	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Nick Nicholson 12632 Linwood Lane Fountain, FL 32438	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Candy Fair 23533 Bluefox Rd Fountain, FL 32438	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Harold Hazelip 17931 Park Pl Fountain, FL 32438	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Hervey Degroff 18507 Hwy 231 Fountain, FL 32438	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

CR2E037 (4/02)

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: Hervey Degroff REQUIRED Hervey Degroff 8-18-02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #