

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2001 8:00 am
Secretary of State

03-28-2001 90202 042 ****61.25

DOCUMENT # N15233

1. Entity Name

AIRPORT BOULEVARD BAPTIST CHURCH INC.

Principal Place of Business

5918 N DAVIS HWY
 PENSACOLA FL 32503
 US

Mailing Address

530 BARKWOOD DRIVE
 PACE FL 32571
 US

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

59-2313458

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

HIGDON, JERRY W
 6450 HERMITAGE DR
 PENSACOLA FL 32504

7. Name and Address of New Registered Agent

Name

VOSS, WILLIS M.

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

530 BARKWOOD DRIVE

PACE, FL

City
PACE

FL

Zip Code
32571

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 **WILLIS M. VOSS**

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

(NOTE: Registered Agent signature required when reinstating)

3-26-2001

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
Department of State

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **VOSS, WILLIS M**
 STREET ADDRESS **530 BARKWOOD DR**
 CITY-ST-ZIP **PACE FL 32571**

TITLE **D** ☒ Delete
 NAME **HAWKINS, HUSTON**
 STREET ADDRESS **10416 WATERFORD DR**
 CITY-ST-ZIP **PENSACOLA FL 32514**

TITLE **D** ☒ Delete
 NAME **DEAL, JOHN M**
 STREET ADDRESS **280 AIRPORT BOULEVARD**
 CITY-ST-ZIP **PENSACOLA FL 32503**

TITLE **P** ☒ Delete
 NAME **HIGDON, JERRY W**
 STREET ADDRESS **6450 HERMITAGE DR.**
 CITY-ST-ZIP **PENSACOLA FL 32504**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE **D** ☐ Change ☒ Addition
 NAME **NIX, MICHAEL**
 STREET ADDRESS **6036 SADDLE CLUB ROAD**
 CITY-ST-ZIP **PACE, FL 32571**

TITLE **D** ☐ Change ☒ Addition
 NAME **JACKSON, JENNIFER**
 STREET ADDRESS **417 S. 2ND ST.**
 CITY-ST-ZIP **PENSACOLA, FL 32507**

TITLE **T/D** ☐ Change ☒ Addition
 NAME **VOSS, WARA B.**
 STREET ADDRESS **530 BARKWOOD DRIVE**
 CITY-ST-ZIP **PACE, FL 32571**

TITLE ☐ Change ☐ Addition
 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: WILLIS M. VOSS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-26-2001

Date

(850) 994-6588

Daytime Phone #

CR2E037 (10/00)