## 2003 NOT-FOR-PROFIT CORPORATION

## UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # N22730** 1. Entity Name

## **FILED** May 01, 2003 8:00 am Secretary of State

05-01-2003 90283 041 \*\*\*\*70.00

FIRST MIS ORIDA, IN	SSIONARY BAPTIST CHURCH IC.	l of ft. Myers, fl				
Principal Place of Business 13971 N. CLEVELAND AVE UNIT 24 NORTH FORT MYERS FL 33903 JS		Mailing Address P.O. BOX 6061 FORT MYERS FL 33911 US				
Principal Place of Business     3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES	
City & State		City & State			4. FEI Number 65-0175649 Applied For Not Applicable	
Zip	Country	Zip	Country			8.75 Additional ee Required
	6. Name and Address of Current	Registered Agent			7. Name and Address of New Registered Ag	jent
KINNEY, 3590 OU' ST JAME	TRIGGER LN S FL 33598		Nor	ACTO Address (F	Forder of Myers FL	28 33903
the obligat	Signature, typed or printed name of registered agent	not of.	Registered Agent signa		when reinstating)  ### Make Check Added to Fees  ### Added to Fees	> Payable to
10	OFFICERS AND DI				<u> </u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR KINNEY, LEO 2596N GASPARILLA STREET ST JAMES CITY FL 33958	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR	neis caery	☐ Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KINNEY, BEVERLY 2596 GASPARILLA ST ST JAMES CITY FL 33958	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		ora Lurent Halgrim Ave. #31	☐ Change
TITLE:	TRT- KINNEY, MARVIN 2596 OUTRIGGER LN ST JAMES CITY FL 33958	De Deiete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		, ,	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MOTT, ARTHUR F JR 2346 WINKLER AVE, #J214 FT MYERS FL 33901	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1.1527	TO ARTHUR F. SR. #F.  PONDELL A RD. #F	404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR CHAMPION, ARTHUR 5239-5 RED CEDAR DR. FORT MYERS FL 33907	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR Ar 25 Nor	thur Champion Trail Tamiami Trail The Fort Myers, FL	Change Addition Lot 46 33903
TITLE NAME		☐ Delete	TITLE NAME			Change 🗋 Addition

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:** 

Arthur F. Mott, Jr.