2003 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2003
Secretary of State

DOCUMENT# N25933

Entity Name: MIDWAY BAPTIST CHURCH, INC.

Current Principal Place of Business:

2902 E. MIDWAY RD.
PLANT CITY, FL 33565

New Principal Place of Business:

Current Mailing Address:

2902 E. MIDWAY RD.
PLANT CITY, FL 33565

New Mailing Address:

FEI Number: 59-1936407 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEISSMAN, MITCHELL
2940 SPRING HAMMOCK DRIVE
PLANT CITY, FL 33567 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	VD	( ) Delete
Name:	PHAGAN, JIM,	
Address:	3115 S. WIGGINS ROAD	
City-St-Zip:	PLANT CITY, FL 33566	
Title:	PD	( ) Delete
Name:	TED MOTT,	
Address:	4821 N. PLATT ROAD	
City-St-Zip:	PLANT CITY, FL 33565	
Title:	SD	( ) Delete
Name:	TURNER, KATHRYN,	
Address:	2504 WILLIAMS ROAD	
City-St-Zip:	PLANT CITY, FL 33565	
Title:	TD	( ) Delete
Name:	BUCHANAN, RUBY,	
Address:	2710 N. WILDER ROAD	
City-St-Zip:	PLANT CITY, FL	
Title:	D	( ) Delete
Name:	NEWSOME, BARNEY,	
Address:	2102 E. NEWSOME RD	
City-St-Zip:	PLANT CITY, FL 33565	
Title:	D	( ) Delete
Name:	MERCER, RAY,	
Address:	1747 JOE MCINTOSH ROAD	
City-St-Zip:	PLANT CITY, FL 33565	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TED MOTT PD 05/15/2003

Electronic Signature of Signing Officer or Director — Date