

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N25987

1. Entity Name

FIRST BAPTIST CHURCH OF ELLENTON, FLORIDA, INC.

FILED
Mar 27, 2000 8:00 am
Secretary of State

03-27-2000 90087 028 ****70.00

Principal Place of Business 1707 36TH AVENUE EAST PALMETTO FL 34221 US	Mailing Address 1707 36TH AVENUE EAST PALMETTO FL 34221-8927 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 59-2468455	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROGERS, LENA J.
1707-36TH AVENUE EAST
PALMETTO FL 34221

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City **FL** Zip Code _____

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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 <input type="checkbox"/> Delete
NAME	ROGERS, LENA JEWEL
STREET ADDRESS	17700 HWY 62
CITY-ST-ZIP	PARRISH FL
TITLE	D <input type="checkbox"/> Delete
NAME	DAVIS, JIM
STREET ADDRESS	3607 101 STREET EAST
CITY-ST-ZIP	PALMETTO FL 34221
TITLE	D <input type="checkbox"/> Delete
NAME	ORVILLE (DICK) MILLER
STREET ADDRESS	2510 3RD ST. E.
CITY-ST-ZIP	BRADENTON FL 34208
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Lena Jewel Rogers* **LENA J. ROGERS** **MARCH 22, 2000** 941-722-4376
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)