

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N25987

1. Entity Name

FIRST BAPTIST CHURCH OF ELLENTON, FLORIDA, INC.

Principal Place of Business

1707 36TH AVENUE EAST  
PALMETTO FL 34221  
US

Mailing Address

1707 36TH AVENUE EAST  
PALMETTO FL 34221  
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

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

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

(NOTE: Registered Agent signature required when reinstating)

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 ROGERS, LENA JEWEL  
STREET ADDRESS 17700 HWY 62  
CITY-ST-ZIP PARRISH FL

TITLE D ☐ Delete  
NAME DAVIS, JIM  
STREET ADDRESS 3607 101 STREET EAST  
CITY-ST-ZIP PALMETTO FL 34221

TITLE D ☐ Delete  
NAME ORVILLE (DICK) MILLER  
STREET ADDRESS 2510 3RD ST. E.  
CITY-ST-ZIP BRADENTON FL 34208

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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

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

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:

*Lena J. Rogers* LENA J. ROGERS 4/16/01 94-722-4326  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED  
Apr 20, 2001 8:00 am  
Secretary of State  
04-20-2001 90022 021 \*\*\*\*70.00



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2468455  
Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional  
Fee Required

CR2E037 (10/00)