

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 26, 2003 8:00 am**  
**Secretary of State**

03-26-2003 90164 026 \*\*\*\*70.00

**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**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2468455**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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. I am familiar with, and accept the obligations of registered agent.

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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Rogers, Lena Jewel</b>	
STREET ADDRESS	<b>17700 HWY 62-POB 346</b>	
CITY-ST-ZIP	<b>Parrish, Fl. 34219</b>	
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 information.

SIGNATURE: *Lena Jewel Rogers* **LENA JEWEL ROGERS** **Jewel Rogers** 3-24-03 941-722-4376

CR2E037 (10/02)