

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State

04-22-2002 90289 008 ****61.25

DOCUMENT # N26372

1. Entity Name

**THE FIRST BAPTIST CHURCH OF ST. PETERSBURG BEACH
, FLORIDA, INC.**

Principal Place of Business

203 73RD AVENUE
ST. PETERSBURG BEACH FL 33706-1918

Mailing Address

203 73RD AVENUE
ST. PETERSBURG BEACH FL 33706-1918

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2348366

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$9.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

~~HARRIS, EARL~~
~~2020 ALTON DRIVE~~
~~SAINT PETERSBURG BEACH FL 33706~~

7. Name and Address of New Registered Agent

Name Charles A. PALMER
Street Address (P.O. Box Number is Not Acceptable) 11201 122 AVE. N. #F169
City LARGO FL Zip Code 33728

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

(NOTE: Registered Agent signature required when reinstating)

DATE 4/11/02

FILE NOW: FEE IS \$81.25

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	MOTTE, JOHN	
STREET ADDRESS	15804 KEDINGTON DRIVE	
CITY - ST - ZIP	REDINGTON BEACH FL 33708	
TITLE	D	<input type="checkbox"/> Delete
NAME	VAZQUEZ, JERRY	
STREET ADDRESS	544 72 AVENUE	
CITY - ST - ZIP	ST PETERSBURG BEACH FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HARRIS, EARL D.	
STREET ADDRESS	2020 ALTON DR.	
CITY - ST - ZIP	ST PETERSBURG BEACH FL	
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		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D-DAVID GORDON	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	11900 85 TERR. N.	
STREET ADDRESS	SEMINOLE FL. 33772	
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		
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: CHARLES A. PALMER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2037 (9/01)