

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 14, 2002 8:00 am
Secretary of State

01-14-2002 90059 047 ****61.25

DOCUMENT # N26991

1. Entity Name

SHANNON AVENUE BAPTIST CHURCH OF PLANT CITY, INC

Principal Place of Business

Mailing Address

**1310 N SHANNON AVE
PLANT CITY FL 33566
US**

**1310 N SHANNON AVE
PLANT CITY FL 33566
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2987702

Applied For

Not Applicable

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

**RAMSARAN, GEORGE
1310 SHANNON AVE
PLANT CITY FL 33566**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **MARTIN, RON**
STREET ADDRESS **4815 S. WALLACE ROAD**
CITY-ST-ZIP **PLANT CITY FL**

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

TITLE **D** ☒ Delete
NAME **SHISLER, TOM**
STREET ADDRESS **741 DON TAB WAY**
CITY-ST-ZIP **PLANT CITY FL 33565**

TITLE **D** ☐ Change ☒ Addition
NAME **WILLIAMS MARVIN**
STREET ADDRESS **702 BAY Drive**
CITY-ST-ZIP **plant city FL 33566**

TITLE **D** ☐ Delete
NAME **CLOSE, DONALD**
STREET ADDRESS **1405 CHARLIE GRIFFIN RD**
CITY-ST-ZIP **PLANT CITY FL 33567**

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

TITLE **PDT** ☐ Delete
NAME **RAMSARAN, GEORGE**
STREET ADDRESS **1310 SHANNON AVE**
CITY-ST-ZIP **PLANT CITY FL 33566**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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:

George Ramsaran
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/02
Date

(813) 754 5383
Daytime Phone #

CR2E037 (9/01)

80002503



DO NOT WRITE IN THIS SPACE