FILED 2001 UNIFORM BUSINESS REPORT (UBR) May 17, 2001 8:00 am Secretary of State **DOCUMENT # N27823** 1. Entity Name 05-17-2001 91308 022 ****61.25 FIRST BAPTIST CHURCH OF SAN MATEO, INC. Principal Place of Business Mailing Address HIGHWAY 100 EAST HIGHWAY 100 EAST POST OFFICE BOX 56 POST OFFICE BOX 56 SAN MATEO FL 32187 SAN MATEO FL 32187 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2278315 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HAAS, LOIS M. 123 PARK DR SATSUMA FL 32189 Zip Code City 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 Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. **Department of State** Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. PD ☐ Addition TITLE ☐ Defete TITLE HOWIE, JOHN NAME NAME 115 GAIL DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SATSUMA FL 32189 Addition ☐ Change TITLE ☐ Delete HAAS, LOIS NAME NAME -123 Park Dr -STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SATSUMA FL 32189 ☐ Change Addition TITLE Delete TITLE THOMAS, ROY NAME NAME 129 STOKES LANDING RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALATKA FL 32177 CITY-ST-ZIP Delete ☐ Change Addition POOLE, G NAME Snedeker, Robert 187 N BOUNDARY ST STREET ADDRESS STREET ADDRESS 162 East End Road CITY-ST-ZIP SAN MATEO FL 32187 CITY-ST-ZIP San Mateo, FL VPD X Delete ☐ Change X Addition TITLE TITLE VPD ROSS, DEWAINE NAME NAME Haak, Jerry 3604 WEAVER RD. STREET ADDRESS STREET ADDRESS 521 Old San Mateo Road CITY-ST-ZIP PALATKA FL 32177 C!TY-ST-ZIP <u>San Mateo, FI 32187</u>

12. I hereby certify that the information supplied with this filling 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 eath; 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.

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

4-30-01

904-328-1377

Change

Addition