2002 UNIFORM BUSINESS REPORT (UBR) FILED May 23, 2002 8:00 am Secretary of State **DOCUMENT # N27823** 1. Entity Name FIRST BAPTIST CHURCH OF SAN MATEO, INC. 05-23-2002 90120 013 ****61.25 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 Country \$8.75 Additional 5. Certificate of Status Desired Feé Required 6. Name and Address of Current Registered Agent. 7.-Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HAAS, LOIS M. 123 PARK DR SATSUMA FL 32189 City 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) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Department of State 10.5 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME HOWIE, JOHN NAME STREET ADDRESS 115 GAIL DRIVE STREET ADDRESS CITY-ST-ZIP SATSUMA FL 32189 CITY-ST-ZIP TITLE TD ☐ Delete TITLE ☐ Change ☐ Addition NAME HAAS, LOIS STREET ADDRESS 123 PARK DR STREET ADDRESS CITY-ST-ZIP SATSUMA FL 32189 CITY-ST-ZIP TITLE SD X Delete TITLE SD ☐ Change X Addition NAME THOMAS, ROY NAME Clark, Carlos STREET ADDRESS 129 STOKES LANDING RD STREET ADDRESS 123 Smith Lane CITY-ST-ZIP PALATKA FL 32177 CITY-ST-ZIP Satsuma, FL 32189 D ☐ Delete TITLE ☐ Change ☐ Addition SNEDEKER, ROBERT NAME STREET ADDRESS 162 EAST, END ROAD STREET ADDRESS CITY-ST-ZIP <u>San Mateo FL 32187</u> CITY-ST-ZIP TITLE VPD X Delete TITLE K Addition NAME HAAK, JERRY NAME Crews, William STREET ADDRESS 521 OLD SAN MATEO ROAD STREET ADDRESS 121 Old Shell Harbor Road CITY-ST-ZIP <u>SAN MATEO FL 32187</u> CiTY-ST-ZIP <u>Satsuma, FI 32189</u>

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 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

STREET ADDRESS

TITLE

NAME

SIGNATURE: 🗠

NAME

STREET ADDRESS

CITY-ST-7IP

Sis Was REQLISIE Maas SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

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☐ Change

☐ Addition

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