## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # **N30865** Feb 26, 2000 8:00 am 1. Entity Name **Secretary of State** BRADENTON WESLEYAN CHURCH, INC. 02-26-2000 90006 047 \*\*\*\*61.25 Principal Place of Business Mailing Address 1938 MANATEE AVE E 1938 MANATEE AVE E **BRADENTON FL 34208 BRADENTON FL 34208-1558** 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2668252 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee 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) BUCKLES, JAMES, E., REV 520 20TH ST E **BRADENTON FL 34208** City Zip Code FI 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 Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State** FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. CD ☐ Change Addition ☐ Defete TITLE TITLE BUCKLES, JAMES E. NAME STREET ADDRESS 520 20TH STREET EAST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** ☐ Delete ☐ Change ☐ Addition TITLE TITLE FAWCETT, CONNIE NAME NAME STREET ADDRESS 6710 ELLENTON GILLETTE RD., #320 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALMETTO FL ☐ Delete ☐ Change ■ Addition TITLE TITLE NAME HUNTER, MARLIN NAME STREET ADDRESS STREET ADDRESS 390 US 301 BLVD, W #9B CITY-ST-ZIP CITY-ST-ZIP BRADENTON FL 34205 ☐ Change ☐ Addition ☐ Delete TITLE TITLE GRIFFIN, JESSE NAME NAME STREET ADDRESS STREET ADDRESS 5640 TRAYLOR AVE CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34243 ☐ Change ☐ Addition ☐ Delete TITLE TITLE HUSBANDS, JIM NAME NAME STREET ADDRESS STREET ADDRESS P.O BOX 218 · N/A CITY-ST-ZIP CITY-ST-7IP anna maria fl ☐ Change ☐ Addition ☐ Delete TITLE **NUTTLE, GRANT** NAME STREET ADDRESS STREET ADDRESS 3209 1ST AVE., W

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 in the phanced or on an attachment with an address with all other like empowered. changed, or on an attact

CITY-ST-ZIP

E. Buckles 2-16-2000

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BRADENTON FL