

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Mar 07, 2001 08:00 AM****Secretary of State****DOCUMENT # N35857****1. Entity Name**

CENTRAL BAPTIST CHURCH OF JUPITER, FLORIDA, INC.

Principal Place of Business	Mailing Address
18477 LOXAHATCHEE RIVER ROAD	18477 LOXAHATCHEE RIVER ROAD
JUPITER FL 33458 US	JUPITER FL 33458 US

2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number	Applied For
	<input checked="" type="checkbox"/> Not Applicable

5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
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BAKER MILDRED B 10479 157TH STREET, NO.  JUPITER FL 33478 US	Name Street Address (P.O. Box Number is Not Acceptable)  City FL Zip Code
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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.
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SIGNATURE	03/07/2001
Signature, typed or printed name of registered agent and title if applicable.	DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	ST <input type="checkbox"/> Delete	TITLE	ST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ULMER DONALD	NAME	ULMER DONALD
STREET ADDRESS	7859 SE RIVERS EDGE ST	STREET ADDRESS	11779 159TH COURT N
CITY-ST-ZIP	JUPITER FL 33458	CITY-ST-ZIP	JUPITER FL 33478
TITLE	VT <input type="checkbox"/> Delete	TITLE	VT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PLEDGER THOMAS	NAME	PLEDGER THOMAS
STREET ADDRESS	16861 JUPITER FARMS RD	STREET ADDRESS	16561 JUPITER FARMS RD
CITY-ST-ZIP	JUPITER FL 33478	CITY-ST-ZIP	JUPITER FL 33478
TITLE	PT <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAKER MILDRED B	NAME	
STREET ADDRESS	10479 157TH ST., N.	STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL 33478	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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)(f), 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.
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SIGNATURE: MILDRED B BAKER	PT	03/07/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		

CR2E037 (11/00)