

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2002 8:00 am
Secretary of State

02-07-2002 90075 039 ****61.25

DOCUMENT # N39313

1. Entity Name

FIRST BAPTIST CHURCH OF EAST PALATKA, INC.

Principal Place of Business

Mailing Address

FIRST BAPTIST OF EAST PALATKA
 VIVIAN L. BOBBITT, PO BOX 404
 EAST PALATKA FL 32131
 US

104 BROWNLING LANE
 EAST PALATKA FL 32131
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

FIRST BAPTIST Church of Palatka

Suite, Apt. #, etc.
104 BROWNLING LANE

City & State
EAST PALATKA

Zip
32131

Country
PUTNAM

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3022421

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

BOBBITT, VIVIAN L
104 BROWNLING LANE
EAST PALATKA FL 32131

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 *Vivian L Bobbitt*

Vivian L Bobbitt

Jan 20-2002

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 Delete
 NAME **TVD WARWICK, W.E.**
 STREET ADDRESS **121 RIVER TERRACE**
 CITY-ST-ZIP **EAST PALATKA FL 32131**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **TSD BOBBITT VIVIAN L**
 STREET ADDRESS **108 BROWNLING LANE**
 CITY-ST-ZIP **EAST PALATKA FL 32131**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **DT HESTER, KERMIT**
 STREET ADDRESS **RT 1 BOX 694 - 106 MAGNOLIA**
 CITY-ST-ZIP **EAST PALATKA FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **DT MILLIS, JUDY**
 STREET ADDRESS **105 TYLER RD EAST**
 CITY-ST-ZIP **EAST PALATKA FL 32131**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **DT BORER, JEWELL**
 STREET ADDRESS **209 PUTNAM AVE**
 CITY-ST-ZIP **EAST PALATKA FL 32131**

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: *Vivian L Bobbitt*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jan 20-2002-325-5330

CR2E037 (9/01)