

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 15, 2003 8:00 am**  
**Secretary of State**

01-15-2003 90183 032 \*\*\*\*61.25

**DOCUMENT # N41758**

1. Entity Name  
**THE FIRST BAPTIST CHURCH OF DOWLING PARK, INC.**



Principal Place of Business

11274 235TH LANE  
LIVE OAK FL 32060

Mailing Address

11274 235TH LANE  
LIVE OAK FL 32060

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3036393**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

**JOHNSON, RUEBEN H JR Sr.**  
23588 116TH ST  
LIVE OAK FL 32060

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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 Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D**  Delete  
NAME **DEES, THOMAS**  
STREET ADDRESS **RT. 1 BOX 708**  
CITY-ST-ZIP **MAYO FL 32066**

TITLE  Change  Addition  
NAME **Dees, Thomas**  
STREET ADDRESS **7616 N.W. C.R. 53**  
CITY-ST-ZIP **MAYO, FL 32066**

TITLE **D**  Delete  
NAME **JOHNSON, RUEBEN**  
STREET ADDRESS **23588 116TH ST**  
CITY-ST-ZIP **LIVE OAK FL**

TITLE  Change  Addition  
NAME **Deanor, Leonard**  
STREET ADDRESS **23321 Live Oak Ln**  
CITY-ST-ZIP **Live Oak, FL 32060**

TITLE **D**  Delete  
NAME **JOHNSON, LOUISE**  
STREET ADDRESS **23588 116TH ST**  
CITY-ST-ZIP **LIVE OAK FL**

TITLE  Change  Addition  
NAME **Dees, Faye**  
STREET ADDRESS **7616 N.W. C.R. 53**  
CITY-ST-ZIP **MAYO, FL 32066**

TITLE **D**  Delete  
NAME **Johnson, Rev. Shawn**  
STREET ADDRESS **23574 116th St.**  
CITY-ST-ZIP **Live Oak, FL 32060**

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D**  Delete  
NAME **Starling, Billy**  
STREET ADDRESS **18912 144th St.**  
CITY-ST-ZIP **Live Oak, FL 32060**

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D**  Delete  
NAME **Starling, Sherwood**  
STREET ADDRESS **14419 189th Rd.**  
CITY-ST-ZIP **Live Oak, FL 32060**

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: **RUEBEN H. JOHNSON JR** *Rueben H. Johnson Jr* **11/13/03**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)