

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000002121

1. Entity Name

LIVE OAK BAPTIST CHURCH OF CRESTVIEW, INCORPORATED

Principal Place of Business

Mailing Address

4565 LIVE OAK CHURCH RD  
CRESTVIEW FL 32539

4565 LIVE OAK CHURCH RD  
CRESTVIEW FL 32539

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2411876

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

WHITE, REV. BILLY W.  
113 CAMELLIA PLACE  
CRESTVIEW FL 32536

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

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

T  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
AMOS, JOYCE  
204 ROSEWOOD AVE  
CRESTVIEW FL 32536 ☒ Delete

T  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
KEELING, DENNIS G.  
2755 SAVANNAH LANE  
CRESTVIEW FL 32539 ☐ Change ☒ Addition

AT  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
BENDER, PEGGY  
21 DABNEY CT  
CRESTVIEW FL 32539 ☐ Delete

☐ Change ☐ Addition

D  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
WHITE, HELEN R.  
113 CAMELLIA PL  
CRESTVIEW FL ☐ Delete

☐ Change ☐ Addition

PTRD  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
WHITE, REV. BILLY W.  
113 CAMELLIA PL  
CRESTVIEW FL ☐ Delete

☐ Change ☐ Addition

☐ Delete

☐ Change ☐ Addition

☐ Delete

☐ Change ☐ Addition

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: Signature of DENNIS G. KEELING Jan 18, 2002 (850) 682-6540

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)