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

FILED Jun 03, 2003 8:00 am Secretary of State 04-23-2003 90080 034 ****61.25

DOCUMENT # N93000002132 1. Entity Name FREEDOM BAPTIST CHURCH, INC.							0, 25, 200.	3 20080 034	01.20	
Principal Place of Business 1740 S. R. 207 ST AUGUSTINE FL 32086 US		Mailing Address 1740 STATE RD 207 ST AUGUSTINE FL 32086				l inks whic 98 00 pages 5	55045	968		
2. Principal i	Place of Business		3. Mailing Address	· ·						
Suite, Apt	. #, etc.		Suite, Apt. #, etc.		· · ·		CHECK HERE IF	MAKING CHANG	ES	
City & Sta	te	ر پی _{ند} مراجعه در سول	City & State	·····		4. FEI Number	59-3241042		Applied For	
Zip		Country	Zip	Country		5. Certificate of S	Status Desired	□ \$8.75	Not Applicable Additional	
	6 Name and 4	Address of Current R	registered Apent			7. Name and Ad	dress of New Re		uirea	
 	<u> </u>			Nar	ne			3000		
SIKES. I	MARGARET						<u> </u>	- 	<u>-</u>	
510 JOHN STREET					Street Address (P.O. Box Number is Not Acceptable)					
SAINT A	ugustine Fl. 32	2084								
				City	, 			FL Zip C	ode	
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	e named entity subn itions of registered a		the purpose of changing its	registered onk	ce or register	ed agent, or both, in	The State of Florid	da, lam familiar w	th, and accept	
SIGNATURE	Signatura, typod oc. printe	Coast Side of registered agent ar	Seles Le	Registered Agent :	Signature (Mquired	when reinstating)	4	18-03 DATE		
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_	FILE NOW: FEI	E IS \$61.25	9. Ejection Cam Trust Fund Co		ng 🛘	\$5.00 May Be Added to Fees		Check Payab Department o		
(5. 10.		E IS \$61.25	Trust Fund Co			\$5.00 May Be Added to Fees	Florida	Department o	f State	
# 10	P	OFFICERS AND DIRE	Trust Fund Co	11.		Added to Fees	Florida	Department o	f State	
10	P Tester, gene	OFFICERS AND DIRE	Trust Fund Co	11. TITLE NAME		Added to Fees	Florida	Department of AND DIRECTORS	f State	
10. · TITLE NAME STREET ADDRESS	P TESTER, GENE 2209 WHIPPOO	OFFICERS AND DIRE	Trust Fund Co	11. TITLE NAME STREET ADDR		Added to Fees	Florida	Department of AND DIRECTORS	f State	
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I hereby certify that the information supplied with this filling 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.