2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9400002613

1. Entity Name

FIRST ANTIOCH MISSIONARY BAPTIST CHURCH OF PLYMO

2300 W ORANGE BLOSSOM TRAIL APOPKA FL 32712

Principal Place of Business

Mailing Address

2300 W ORANGE BLOSSOM TRAIL APOPKA FL 32712

FILED
May 07, 2001 8:00 am
Secretary of State
05-07-2001 90036 020 ****61.25

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					. 616 16111 51611 66111 66111 66111 56111			
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FEI Numbe	59-3121931	<u> </u>	olied For Applicable	
Zip	Country	Zip	Country	5. Certificate	of Status Desired	\$8.75 Addi		
	6. Name and Address of Current I		7. Name and Address of New Registered Agent					
2300 W O APOPKA I			2300 City A	Street Address (P.O. Box Number is Not Acceptable) 3300 W DRANGE Blossom TRAIL City APOPKA FL Zip Code 327/2				
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 ALTHONY T. DUCKSWIRTH Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remarkating) UATE								
	FILE NOW: FEE IS \$61.25	9. Election Campaign Trust Fund Contribu	· — •	5.00 May Be idded to Fees	Make Check Departmen			
10. OFFICERS AND DIRECTORS			11.	ADDITIONS/CHA	ANGES TO OFFICERS AND D	IRECTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUCKSWORTH, GEORGE R 2300 W ORANGE BLOSSOM TRA APOPKA FL 32712	Delete AlL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOON.D	eth, Anthony Range Blosse 1. 32712	T. Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CANNON, VIRGINIA 2300 W ORANGE BLOSSOM TRA APOPKA FL 32712	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	govysku, i	1. 00 11 2	☐ Change	Addition	
TITLE	D	☐ Delete	TITLE			Change	Addition-	
NAME STREET ADDRESS CITY-ST-ZIP	NELSON, QUINTON 2300 W ORANGE BLOSSOM TRA APOPKA FL 32712		NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NEAL, HAROLD 2300 W ORANGE BLOSSOM TRA APOPKA FL 32712	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, JOHNNIE 2300 W ORANGE BLOSSOM TRA APOPKA FL 32712	☑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
12. I hereby of indicated	certify that the information supplied with on this report or supplemental report is	this filing does not qualify for true and accurate and that n	the exemption stated in ny signature shall have	n Section 119.07(3)(the same legal effec	i) Florida Statutes. I further ce as if made under oath; that I	rtify that the int am an officer	formation or director	

of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida changed, or on an attachment with an address, with all other like empowered.