

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 91125 036 ****61.25

DOCUMENT # N95000002951

1. Entity Name
DARLINGTON OAK GROVE BAPTIST CHURCH, INCORPORATE
D

Principal Place of Business 1717 OAK GROVE ROAD WESTVILLE FL 32464 US	Mailing Address 1717 OAK GROVE ROAD WESTVILLE FL 32464 US
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2093642	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GILLMAN, FRED
2914 COOK ROAD
WESTVILLE FL 32464

7. Name and Address of New Registered Agent

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 *Fred D. Gillman* APRIL 26, 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. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> Delete
NAME	ALFORD, STEVE
STREET ADDRESS	191 OAK GROVE ROAD
CITY-ST-ZIP	WESTVILLE FL
TITLE	D <input type="checkbox"/> Delete
NAME	GILLMAN, FRED
STREET ADDRESS	2914 COOK RD
CITY-ST-ZIP	WESTVILLE FL
TITLE	D <input type="checkbox"/> Delete
NAME	DAVIS, H. B
STREET ADDRESS	1917 CO. HWY. 183 S
CITY-ST-ZIP	DEFUNIAK SPRINGS FL
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	MCDUFFIE, DANNY W
STREET ADDRESS	RE 2 BOX 49
CITY-ST-ZIP	SAMSON AL
TITLE	D <input type="checkbox"/> Delete
NAME	HOLLOWAY, DALE D
STREET ADDRESS	671 MIMS RD
CITY-ST-ZIP	DEFUNIAK SPRINGS FL
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JERRY WHITE
STREET ADDRESS	2833 COLLINSWORTH RD
CITY-ST-ZIP	WESTVILLE, FL 32464
TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KENNETH ELLISON
STREET ADDRESS	333 ELLISON RD
CITY-ST-ZIP	SAMSON, AL 36477
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Fred D. Gillman* SIGNATURE: *Fred D. Gillman* 4/26/2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)