

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N95000004691

FILED  
Feb 25, 2003  
Secretary of State

**Entity Name:** MICHIGAN AVENUE MISSIONARY BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

2415 FARRIS AVE  
PENSACOLA, FL 32526 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 37326  
PENSACOLA, FL 32526 US

**New Mailing Address:**

**FEI Number:** 59-3467542

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

STULTZ, JANICE V  
6530 N PALAFOX ST  
LOT 54 A  
PENSACOLA, FL 32503 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DT ( ) Delete  
Name: STULTZ, JANICE V  
Address: 6530 N. PALAFOX  
City-St-Zip: PENSACOLA, FL 32503

Title: D (X) Delete  
Name: BLACKMON, BOBBY  
Address: 2532 SANORA CALZADA  
City-St-Zip: PENSACOLA, FL 32507

Title: D ( ) Delete  
Name: ALLEN, RALPH H  
Address: 2415 FARRIS AVE  
City-St-Zip: PENSACOLA, FL 32526

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RALPH H. ALLEN

D

02/25/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date