

**2002 UNIFORM BUSINESS REPORT (UBR)****FILED**  
**Feb 11, 2002 8:00 am**  
**Secretary of State**

02-11-2002 90009 006 \*\*\*\*61.25

0015503

**DOCUMENT # N97000004973**

1. Entity Name

**FIRST BAPTIST CHURCH OF DANIA HOLDING COMPANY**

Principal Place of Business

**23 NW 1ST STREET  
DANIA FL 33004-2831**

Mailing Address

**23 NW 1ST STREET  
DANIA FL 33004-2831**

2. Principal Place of Business

**213 E Sheridan St.**

Suite, Apt. #, etc.

**Suite 1**

City &amp; State

**Dania Beach, FL**

Zip

**33004**

Country

**Broward**

3. Mailing Address

**213 E. Sheridan St.**

Suite, Apt. #, etc.

**Suite 1**

City &amp; State

**Dania Beach, FL**

Zip

**33004**

Country

**Broward**

DO NOT WRITE IN THIS SPACE

4. FEI Number

**59-0967943**

Applied For

☒ Not Applicable5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**AUSTIN, RICHARD  
23 NW 1ST STREET  
DANIA FL 33004-2831**

7. Name and Address of New Registered Agent

Name

**Austin, Richard**

Street Address (P.O. Box Number is Not Acceptable)

**213 E. Sheridan St.****Suite 1**

City

**Dania Beach****FL**

Zip Code

**33004**

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

TITLE	PD	<input type="checkbox"/> Delete
NAME	AUSTIN, RICHARD	
STREET ADDRESS	321 SE 3RD PLACE	
CITY-ST-ZIP	DANIA FL 33004	

TITLE	VD	<input type="checkbox"/> Delete
NAME	FOX, WILLIAM	
STREET ADDRESS	825 NW 7TH AVE	
CITY-ST-ZIP	DANIA FL 33004	

TITLE	VD	<input type="checkbox"/> Delete
NAME	RENNERT, BRUCE	
STREET ADDRESS	1205 SW 4TH AVE	
CITY-ST-ZIP	DANIA FL 33004	

TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	DENNY, Nanci	
STREET ADDRESS	1508 SCOTT ST	
CITY-ST-ZIP	HOLLYWOOD FL 33020	

TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	BUFFENBARGER, ELIZABETH	
STREET ADDRESS	321 SE 3 PL	
CITY-ST-ZIP	DANIA FL 33004	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Samuel Arbefeulle	
STREET ADDRESS	2127 Polk St. Apt. 1	
CITY-ST-ZIP	Hollywood, FL 33020	

TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Antoinette Fox	
STREET ADDRESS	825 NW 7 Ave.	
CITY-ST-ZIP	Dania Beach, FL 33004	

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		

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:

01/25/02 954-920-4625

CR2E037 (9/01)