


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

**FILED**  
**Feb 17, 2003 8:00 am**  
**Secretary of State**

02-17-2003 90273 031 \*\*\*\*61.25

**DOCUMENT # N97000005203**

1. Entity Name  
**NORTHWEST BAPTIST CHURCH OF BRADENTON, INC.**



Principal Place of Business  
**7913 9TH AVENUE NW  
BRADENTON FL 34209**

Mailing Address  
**P O BOX 14817  
BRADENTON FL 34280**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip

4. FEI Number **59-3466867**  
Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

~~TERRY, ROB  
502 SALLY LEE DRIVE  
ELLENTON FL 34222~~

7. Name and Address of New Registered Agent

Name: **NORRIS PYLES**  
Street Address (P.O. Box Number is Not Acceptable):  
**1605 86th Court NW**  
**BRADENTON, FL 34209**  
City: **BRADENTON, FL** Zip Code: **34209**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Norris Pyles* (NOTE: Registered Agent signature required when reinstating.) DATE: **2-12-2003**

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>TERRY, ROBBY</b> <b>502 SALLEY LEE DRIVE</b> <b>ELLENTON FL 34222</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>SOLLENBERGER, GEORGE</b> <b>1700 3 AVE W, #719</b> <b>BRADENTON FL 34205</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>FORTSON, L H (BUD)</b> <b>4959 28 COURT E</b> <b>BRADENTON FL 34203</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Norris Pyles</b> <b>1605 86th Court NW</b> <b>BRADENTON, FL 34209</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Rolly Johnson</b> <b>6006 Gulf Drive #103</b> <b>HOLMES BEACH, FL 34217</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Ralph Hottman</b> <b>907 72nd Street NW</b> <b>BRADENTON, FL 34209</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Norris Pyles* **SIGNATURE REQUIRED** DATE: **2-12-2003**

CR2E037 (10/02)