

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 05, 2002 8:00 am
Secretary of State

06-05-2002 90415 044 ****70.00

DOCUMENT # N98000002214

1. Entity Name

OPEN DOOR BAPTIST CHURCH OF POLK CITY, INCORPORATED

Principal Place of Business

125 CARTER BLVD.
 POLK CITY FL 33868

Mailing Address

~~P.O. BOX 858~~
~~POLK CITY FL 33868~~

2. Principal Place of Business

3. Mailing Address

125 Carter Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Polk City, FL

Zip

Country

33868

USA

4. FEI Number

59-3518231

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BENNER, JEFFREY J
 216 LARKSPUR LANE
 POLK CITY FL 33868

7. Name and Address of New Registered Agent

Name

Tom Pafford

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

512 Edgewater Drive

City

Polk City

FL

Zip Code

33868

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

Tom Pafford

Pastor Tom Pafford

6/2/02

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 ☒ Delete
 NAME BENNER, JEFFREY
 STREET ADDRESS 216 LARKSPUR LANE
 CITY-ST-ZIP POLK CITY FL 33868

TITLE VD ☐ Delete
 NAME GOODMAN, LARRY
 STREET ADDRESS 203 S. BOUGAINVILLEA AVE.
 CITY-ST-ZIP POLK CITY FL 33868

TITLE D ☐ Delete
 NAME BLAKEMORE, WAYNE
 STREET ADDRESS 370 BAYBERRY DRIVE
 CITY-ST-ZIP POLK CITY FL 33868

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Change ☒ Addition
 NAME Tom Pafford
 STREET ADDRESS 512 Edgewater Drive
 CITY-ST-ZIP Polk City, FL 33868

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

Tom Pafford
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pastor Tom Pafford

Date

Daytime Phone #

6/2/02 863984
 8621

CR2E037 (9/01)