

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Feb 11, 2000 8:00 am**
Secretary of State

02-11-2000 90022 044 ****70.00

DOCUMENT # N98000004159

1. Entity Name

ST. LEWIS MISSIONARY BAPTIST CHURCH, INC.

Principal Place of Business

Mailing Address

**12162 BREAD STREET
BROOKSVILLE FL 34601****22300 WHITMAN ROAD
BROOKSVILLE FL 34601-4504**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
65-0825291Applied For
Not Applicable5. Certificate of Status Desired ☒**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent**

Name

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

City

FL

Zip Code

**FLETHCER, BERNICE N
22300 WHITMAN ROAD
BROOKSVILLE FL 34601**

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	D	<input type="checkbox"/> Delete
NAME	FLETCHER, ROY R	
STREET ADDRESS	22300 WHITMAN ROAD	
CITY-ST-ZIP	BROOKSVILLE FL 34601	
TITLE	D	<input type="checkbox"/> Delete
NAME	NEWTON, THOMAS C	
STREET ADDRESS	P.O. BOX 492	
CITY-ST-ZIP	BROOKSVILLE FL 34605	
TITLE	D	<input type="checkbox"/> Delete
NAME	FLETCHER, BERNICE N	
STREET ADDRESS	22300 WHITMAN ROAD	
CITY-ST-ZIP	BROOKSVILLE FL 34601	
TITLE	D	<input type="checkbox"/> Delete
NAME	FRIBLEY, GEORGE	
STREET ADDRESS	27103 AUBREY AVENUE	
CITY-ST-ZIP	BROOKSVILLE FL 34602	
TITLE	D	<input type="checkbox"/> Delete
NAME	HOWARD, PAMELA F	
STREET ADDRESS	11950 BROAD STREET	
CITY-ST-ZIP	BROOKSVILLE FL 34601	
TITLE	D	<input type="checkbox"/> Delete
NAME	STEPHENS, EARNESTINE	
STREET ADDRESS	22487 JACOBSON ROAD	
CITY-ST-ZIP	BROOKSVILLE FL 34601	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

Bernice Newton Fletcher
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR*February 7, 2000*
Date Daytime Phone #