2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # N98000004166 Jul 24, 2000 8:00 am Secretary of State FAITH BAPTIST CHURCH OF BLOUNTSTOWN, INC. 03-27-2000 90118 047 ****61.25 Principal Place of Business Mailing Address 1100 CALHOUN AVENUE 1100 CALHOUN AVENUE **BLOUNTSTOWN FL 32424 BLOUNTSTOWN FL 32424** 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3458482 Not-Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 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) CUTCHIN, ALFRED E 1318 S. HWY 71 WEWAHITCHKA FL 32465 City Zip Code 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 DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State After September 13, 2000 min. will be \$236.25 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITI F Change Addition TITLE ☐ Defete CUTCHIN, ALFRED E NAME NAME STREET ADDRESS STREET ADDRESS 1318 S. HWY 71 CITY-ST-ZIP **WEWAHITCHKA FL 32465** CITY-ST-ZIP ☐ Addition TITLE ☐ Change ☐ Delete PORTER, JIMMY NAME 'PO 'BOX 95" N/A STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLARKSVILLE FL 32430 CITY-ST-7IP ☐ Change ☐ Addition Delete TIT! F TITLE SMITH, TRAVIS NAME NAME STREET ADDRESS 2330 DOWNHOMME RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **GRAND RIDGE FL 32441** Delete TR ☐ Change Addition TITLE TITLE SEWELL, ALBERT NAME RT.1 BOX 45-S STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOSFORD FL 32334 CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE PARKER E. LUTCHIN NAME NAME 1318 S. HW471 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Wewahitchka, Fl ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Daylima Phono # 200

changed, or on an attachment with an address, with all other like empowered

Fee already Paid
Check # 1948 dated 3/22/00
Fee already Paid Check # 1948 dated 3/22/00 FAITH BAPTIST CHURCH
Bloamtstown, FL