2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000004520

Entity Name: MILLEDGE BAKER MINISTRIES, INC.

Apr 13, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8100 PINE FOREST ROAD WALNUT HILL, FL 32568 **Current Mailing Address: New Mailing Address:** 8100 PINE FOREST ROAD WALNUT HILL, FL 32568 FEI Number: 59-3527669 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BAKER, MILLEDGE L 8100 PINE FOREST ROAD WALNUT HILL, FL 32568 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BAKER, MILLEDGE L Name: Name: 8100 PINE FOREST ROAD Address: Address: WALNUT HILL, FL 32568 City-St-Zip: City-St-Zip: Title: DV () Delete Title: () Change () Addition BAKER, BARBARA S Name: Name: Address: 8100 PINE FOREST ROAD Address: City-St-Zip: WALNUT HILL, FL 32568 City-St-Zip: Title: DTS () Delete Title: () Change () Addition BAKER, ANGELA M Name: Name: 8100 PINE FOREST ROAD Address: Address: City-St-Zip: WALNUT HILL, FL 32568 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: SANDERS, TED Name: MC DOWELL-FLEMING, DAVID REV. 402 SOUTH PRESLEY STREET 3560 BRIERCLIFF Address: Address: City-St-Zip: ATMORE, AL 36502 City-St-Zip: PENSACOLA, FL 32860 Title: () Delete Title: (X) Change () Addition SANDERS, MARY K BRYAN, KENNY O Name: Name: 402 SOUTH PRESLEY STREET 3821 HOWELL RD Address: Address: WALNUT HILL, FL 32568 City-St-Zip: ATMORE, AL 36502 City-St-Zip: Title: () Delete Title: (X) Change () Addition TRAVIS. CHARLES T TRAVIS, CHARLES T DR. Name: Name: Address: 11152 OAK RIDGE DRIVE S. Address: 11152 OAK RIDGE DRIVE S. JACKSONVILLE, FL 32225 JACKSONVILLE, FL 32225 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MILLEDGE L. BAKER DP 04/13/2002