2001 UNIFORM BUSINESS REPORT (UBR)

Jun 01, 2001 8:00 am DOČUMENT # N99000002170 Secretary of State 1. Entity Name 06-01-2001 90002 001 ****61.25 CHURCH OF CHRIST IN GLENWOOD, INC. Principal Place of Business Mailing Address 708 E. 13TH ST. 708 E. 13TH ST. PANAMA CITY FL 32401 PANAMA CITY FL 32401 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEt Number 59-3471934 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П 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) PORTER, MARVIN 928 S. KIMBREL AVE. PANAMA CITY FL 32404 Zip Code FL 8. The above named entity submits this statement for the purpose of changing it registered office or registered agent, or both, in the state of Florida. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NO E: Registered Agent signature required when reinstating) Make Check Payable to **FILE NOW:** 9. Election Campaig 1 Financing \$5.00 May Be Trust Fund Contribution. **Department of State** Added to Fees FEE IS \$61,25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TD Addition TITLE ☐ Delete TITLE Marvin Porter FOX, JIMMIE B NAME NAME 928 S. Kimbrel Aue STREET ADDRESS 1021 S KIMBRELL STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL 32404 D ☐ Change Addition ☐ Delete TITLE TITLE BLUE, WILLIE C NAME NAME 1209 LOUISIANNE AVE STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP CEDAR RAPIDS IA 52404 TITLE ☐ Delete TITLE Change Addition CARTER, WILLIAM R NAME NAME STREET ADDRESS 5921 HAVARD RT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL 32404 TITLE Delete TITLE Change ■ Addition MONROE, ROBERT E JR NAME NAME STREET ADDRESS 8921 HOWARD RD STREET ADDRESS CITY-ST-ZIP PANAMA CITY FL 32404 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE SNELL, XERXES M NAME NAME 6521 OLOKEE ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PANAMA CITY FL 32404 CITY-ST-ZIP CD TITLE Delete TITLE ☐ Addition SALDLER, GERALD NAME NAME STREET ADDRESS 708 E 13TH CT STREET ADDRESS PANAMA CITY FL 32401 CITY-ST-ZIP

SIGNATURE: SMONTHESESTIN MARVINTER 431/61 8

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

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 in the corporation of 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 in the corporation of 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 in the corporation of 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 in the corporation of 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 in the corporation of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 in the corporation of the receiver of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 11 in the corporation of the corpo