

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 06, 2002 8:00 am
Secretary of State

08-06-2002 90280 033 ****61.25

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1. Entity Name

EMERALD COAST SCHOOL OF BIBLE, INC.

Principal Place of Business

**406 S NAVY BLVD.
PENSACOLA FL 32507**

Mailing Address

**406 S NAVY BLVD.
PENSACOLA FL 32507**

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

59-3575446

Applied For

Not Applicable

5. 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

**POPE, RAY P
4400 BAYOU BLVD
SUITE 54B
PENSACOLA FL 32503**

Name

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

City

FL

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**After September 13, 2002,
min. will be \$236.25.**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME **TD**
STREET ADDRESS **COOPER, BOB**
CITY-ST-ZIP **6007 CHANDELLE CIR
PENSACOLA FL 32507** ☐ Delete

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

TITLE
NAME **PD**
STREET ADDRESS **MAVES, ARNIE**
CITY-ST-ZIP **4357 ACACIA DRIVE
PENSACOLA FL 32503** ☐ Delete

TITLE
NAME **D**
STREET ADDRESS **Maves, Arnie**
CITY-ST-ZIP **4357 Acacia Drive
Pensacola, FL 32503** ☒ Change ☐ Addition

TITLE
NAME **SD**
STREET ADDRESS **KIRKLAND, LYNN**
CITY-ST-ZIP **7525 CHUMUCKLA HWY.
PACE FL 32571** ☒ Delete

TITLE
NAME **SD**
STREET ADDRESS **Sinclair, Bruce**
CITY-ST-ZIP **5413 Woodsman Dr.
Pace, FL 32571** ☐ Change ☒ Addition

TITLE
NAME **D**
STREET ADDRESS **GRIDER, JOE**
CITY-ST-ZIP **1220 E BLOUNT ST
PENSACOLA FL 32503** ☐ Delete

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

TITLE
NAME **D**
STREET ADDRESS **HANSEN, JAMES**
CITY-ST-ZIP **200 RENTZ AVE
PENSACOLA FL 32507** ☒ Delete

TITLE
NAME **D**
STREET ADDRESS **Richard Wilcox**
CITY-ST-ZIP **103 Hampton Rd
Gulf Breeze, FL 32561** ☐ Change ☒ Addition

TITLE
NAME **D**
STREET ADDRESS **HORNICK, BOB**
CITY-ST-ZIP **406 S NAVY BLVD.
PENSACOLA FL 32507** ☐ Delete

TITLE
NAME **PD**
STREET ADDRESS **Mornick, Bob**
CITY-ST-ZIP **406 S. Navy Blvd.
Pensacola, FL 32507** ☒ Change ☐ Addition

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 an other like empowered.

SIGNATURE:

REQUIRE R. Cooper, Treas.

7/10/02

492-9567

CR2E037 (4/02)