2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # N99000002684 May 11, 2000 8:00 am Secretary of State 1. Entity Name GRACE PROGRESSIVE MISSIONARY BAPTIST CHURCH, INC 05-11-2000 90250 001 ***122.50 Mailing Address Principal Place of Business 236 DR. MARTIN LUTHER KING AVE W 236 DR. MARTIN LUTHER KING AVE W BRADENTON FL 34205 BRADENTON FL 34205 2. Principal Place of Business Mailing Address P.O. BOX DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite Ant # etc. Applied For City & State Bradenton, FL 59-341977 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SEARLES, JOHNN J JR 236 DR. MARTIN LUTHER KING AVE W **BRADENTON FL 34205** 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing FILE NOW: \$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. Change Addition PD Delete TITLE TITLE NAME NAME SEARLES, JOHNN J JR STREET ADDRESS STREET ADDRESS 1524-27TH AVE E CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** Delete ☐ Change Addition VD. TITLE TITLE NAME NAME DOZIER, SHERMAN STREET ADDRESS STREET ADDRESS 1925 20TH ST S CITY-ST-ZIP ST PETERSBURG FL CITY-ST-ZIR ☐ Addition TITLE ΤĎ ☐ Delete TITLE Adrienne Reddick 9910 Sugar Hill Dr NAME REDDICK, ADRIENNE NAME STREET ADDRESS STREET ADDRESS 6037 34TH ST Bradentan, FL 34202 CITY-ST-ZIP CITY-ST-ZIP W BRADENTON FL Change ☐ Addition ☐ Delete TITLE TITLE NAME BUNDRAGE, YVONNE NAME STREET ADDRESS STREET ADDRESS 1002 110TH ST E CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete ☐ Change TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP constion 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 supplier ental report is true and accurate and that my signature shall have the same legal affect on if Today and accurate and that my signature shall have the same legal affect on if 12. I hereby certify that the information indicated on this report of su citue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director overea to secure this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or th receiver trustee emp changed, or on an attachment

Daytima Phone #