

7/17

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 12, 2002 8:00 am**  
**Secretary of State**

07-17-2002 90128 003 \*\*\*\*61.25

**DOCUMENT # N99000002684**

1. Entity Name

**GRACE PROGRESSIVE MISSIONARY BAPTIST CHURCH, INC**

Principal Place of Business

Mailing Address

3505 1ST STREET EAST  
BRADENTON FL 34208P.O. BOX 1164  
BRADENTON FL 34206

99221

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

59-3619773

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

SEARLES, JOHNN J JR  
1524 27TH AVE E  
BRADENTON FL 34208

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 FeesMake Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PD	SEARLES, JOHNN J JR	1524-27TH AVE E	BRADENTON FL				
VD	DOZIER, SHERMAN	1925 20TH ST S	ST PETERSBURG FL				
TD	REDDICK, ADRIENNE	9910 SUGAR HILL DR	BRADENTON FL 34202	Treasurer	PUEVIS LOUISE	2629 13th Ave E	BRADENTON, FL 34208
SD	BUNDRAGE, YVONNE	1002 110TH ST E	BRADENTON FL	Secretary	JENKINS, TIFFANY	5413 Sconeysbrook LN	BRADENTON, FL 34203

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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E037 (4/02)