

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2003 8:00 am
Secretary of State

01-30-2003 90182 016 ****61.25

DOCUMENT # N99000002684

1. Entity Name

GRACE PROGRESSIVE MISSIONARY BAPTIST CHURCH, INC



Principal Place of Business

**3505 1ST STREET EAST
BRADENTON FL 34208**

Mailing Address

**P.O. BOX 1184
BRADENTON FL 34208**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

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

FILE NOW - FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SEARLES, JOHNN J JR 1524-27TH AVE E BRADENTON FL	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD DOZIER, SHERMAN 1925 20TH ST S ST PETERSBURG FL	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T LOUISE, PURVIS 629.13TH AVE E BRADENTON FL 34208	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD BUNDRAGE, YVONNE 1002 110TH ST E BRADENTON FL	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S JENKINS, TIFFANY 5413 STONEYBROOK LN BRADENTON FL 34203	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ 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 all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED