

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

**FILED**  
**Apr 28, 2003 8:00 am**  
**Secretary of State**

04-28-2003 91290 049 \*\*\*\*61.25

**DOCUMENT # N99000005129**



1. Entity Name  
**MOBILE HIGHWAY BAPTIST CHURCH, INC.**

Principal Place of Business

**9721 MOBILE HWY  
PENSACOLA FL 32526**

Mailing Address

**9721 MOBILE HWY  
PENSACOLA FL 32526**

**11023552**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1737852**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**GIBSON, JAMES W JR.  
7227 SHELBY LANE  
PENSACOLA FL 32526**

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

*James W. Gibson Jr.*

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

(NOTE: Registered Agent signature required when reinstating)

*04/24/03*

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 **D** ☒ Delete  
NAME **COBB, MARY ELIZABETH**  
STREET ADDRESS **6366 FRANK REEDER RD.**  
CITY-ST-ZIP **PENSACOLA FL 32526**

TITLE ☐ Change ☒ Addition  
NAME **Gibson, James Wilmoth Jr.**  
STREET ADDRESS **7227 Shelby Lane**  
CITY-ST-ZIP **Pensacola FL 32526**

TITLE **D** ☐ Delete  
NAME **SMITH, JULIE ROSSING**  
STREET ADDRESS **5777 WINDEMERE TRACE**  
CITY-ST-ZIP **PENSACOLA FL 32571**

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

TITLE **D** ☐ Delete  
NAME **LAWSON, CARL G JR**  
STREET ADDRESS **8130 MOBILE HWY**  
CITY-ST-ZIP **PENSACOLA FL 32526**

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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CITY-ST-ZIP

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

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

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:

*James W. Gibson Jr.*

*04/24/03*

*850 944 4505  
850-944-3454*

CR2E037 (10/02)