

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 26, 2000 8:00 am
Secretary of State

01-26-2000 90183 045 ****70.00

DOCUMENT # N99000005314

1. Entity Name

FIRST BAPTIST CHURCH OF CRESTVIEW, INC.

Principal Place of Business

Mailing Address

102 EAST CEDAR AVENUE
 CRESTVIEW FL 32536

102 EAST CEDAR AVENUE
 CRESTVIEW FL 32536-2722

2. Principal Place of Business

3. Mailing Address

798 Pearl St., North

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Crestview, FL

4. FEI Number

HC 59-0737873

Applied For

Not Applied For

Zip

Country

Zip

Country

32536

Okaloosa

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

Name

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

City

FL

Zip Code

SIMPSON, JAMES
798 PEARL STREET, NORTH
CRESTVIEW FL 32536

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

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

James Simpson

(NOTE: Registered Agent signature required when reinstating)

1-21-2000

DATE

FILE NOW:
FEF IS \$61.25

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

TITLE	CD	<input type="checkbox"/> Delete
NAME	SIMPSON, JAMES	
STREET ADDRESS	798 PEARL ST., N	
CITY-ST-ZIP	CRESTVIEW FL 32536	
TITLE	VCD	<input checked="" type="checkbox"/> Delete
NAME	EDWARDS, JOHN	
STREET ADDRESS	798 PEARL ST., N	
CITY-ST-ZIP	CRESTVIEW FL 32536	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	BARBER, JEFF	
STREET ADDRESS	798 PEARL ST., N	
CITY-ST-ZIP	CRESTVIEW FL 32536	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VCD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Rhoden, Lawton	
STREET ADDRESS	798 Pearl St., N.	
CITY-ST-ZIP	Crestview, FL 32536	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ewerds, Larry	
STREET ADDRESS	798 Pearl St., N	
CITY-ST-ZIP	Crestview, FL 32536	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

SIGNATURE **James Simpson**

1-21-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #