

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000005428

1. Entity Name

THE GREAT COMMISSION BAPTIST CHURCH OF LAKE LAND,

**FILED**  
Sep 06, 2001 8:00 am  
Secretary of State

09-06-2001 90265 009 \*\*\*\*61.25

Principal Place of Business

Mailing Address

~~2120 SYLVESTER RD.  
LAKE LAND FL 33803~~

~~2120 SYLVESTER RD.  
LAKE LAND FL 33803~~

2. Principal Place of Business

2821 SKYVIEW DR.

3. Mailing Address

P.O. BOX 2348

Suite, Apt. #, etc.

LAKE LAND, FL 33801

Suite, Apt. #, etc.

City & State

City & State

LAKE LAND, FL

4. FEI Number

59-3616933

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

Zip  
33801

Country

POLK

Zip

33840

Country

POLK

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOLTON, EDWIN G  
4480 OLD COLONY RD.  
MULBERRY FL 33860

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.

SIGNATURE

EDWIN G. HOLTON

Edwin G. Holton

7/14/01

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  
After September 12, 2001, min. will be \$236.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME HOLTON, EDWIN G  
STREET ADDRESS 4480 OLD COLONY RD.  
CITY-ST-ZIP MULBERRY FL 33860 ☐ Delete

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

TITLE STD  
NAME BERRY, ELIZABETH  
STREET ADDRESS 416 EL DORADO  
CITY-ST-ZIP LAKE LAND FL 33809 ☐ Delete

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

TITLE D  
NAME LIBURD, ROY V  
STREET ADDRESS 738 CANDYCE AVE.  
CITY-ST-ZIP LAKE LAND FL 33805 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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:

Edwin G. Holton

7/14/01 (863)669-1118

CR2ER37 (5/01)