

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N07980

1. Entity Name

O'BRIEN BAPTIST CHURCH, INC.

FILED
Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90066 047 ****61.25

Principal Place of Business

T.J. FLETCHER JR.
21890 FLETCHER RD.
O'BRIEN FL 32071
US

Mailing Address

T.J. FLETCHER JR.
21890 FLETCHER RD.
O'BRIEN FL 32071
US

2. Principal Place of Business

O'Brien, FL

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 10

Suite, Apt. #, etc.

City & State

O'Brien, FL 32071

Zip

Country

Zip

Country

4. FEI Number

59-2356452

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

FLETCHER, T.J. JR.
21890 FLETCHER RD.
O'BRIEN FL 32071

7. Name and Address of New Registered Agent

Name
HOLTZCLAW, J.M.

Street Address (P.O. Box Number is Not Acceptable)
21809 93rd Dr.

O'Brien, FL 32071

City
O'Brien,

FL

Zip Code
32071

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.

(NOTE: Registered Agent signature required when reinstating)

1-29-01

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
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
NAME FLETCHER, T.J. JR.
STREET ADDRESS 21890 FLETCHER RD
CITY-ST-ZIP O'BRIEN FL 32071

TITLE D ☐ Delete
NAME HOLTZCLAW, J.M.
STREET ADDRESS 21809 93RD DRIVE
CITY-ST-ZIP O'BRIEN FL 32071

TITLE D ☐ Delete
NAME BOND, RAYMOND, JR.
STREET ADDRESS 15543 164TH ST
CITY-ST-ZIP MCALPIN FL 32062

TITLE D ☐ Delete
NAME BUCKNER, CHARLES
STREET ADDRESS P.O. BOX 204 N/A
CITY-ST-ZIP O'BRIEN FL 32071

TITLE D ☐ Delete
NAME ROBERTS, EDWARD
STREET ADDRESS POST OFFICE BOX 184 N/A
CITY-ST-ZIP O'BRIEN FL 32071

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☒ Change ☐ Addition
NAME HOLTZCLAW, J.M.
STREET ADDRESS 21089 93rd Dr..
CITY-ST-ZIP O'Brien, FL 32071

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

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

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

TITLE ☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
T.J. Fletcher

1-29-01

904-776-2652

Date

Daytime Phone #

CR2E037 (10/00)

0017223