## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED Feb 01, 2001 8:00 am Secretary of State DOCUMENT # 716730 1. Entity Name SOLID ROCK CHURCH OF GOD OF KISSIMMEE, INC. 02-01-2001 90192 016 \*\*\*\*61.25 Principal Place of Business Mailing Address 1904 N. MICHIGAN AVE. 1904 N. MICHIGAN AVE. KISSIMMEE FL 34744 KISSIMMEE FL 34744 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1856374 Not Applicable Zip Country \$8.75 Additional\_\_\_ 5. Certificate of Status Desired - - - -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) BUTLER, THIERRY L 4451 KISSIMMEE PARK RD ST CLOUD FL 34772 City Zip Code FL 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) DATE FILE NOW: 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution. Added to Fees **Department of State** FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Addition □ Delete TITLE ☐ Change BUTLER, MARYLU H NAME NAME 4451 KISSIMMEE PARK ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST CLOUD FL D TITLE Delete TITLE ☐ Change ☐ Addition **BROOMES, JAMES** NAME NAME 708, AMERICANA COURT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP KISSIMMEE FL CITY-ST-ZIP DS TITLE Delete TITLE ☐ Change ☐ Addition YOUNG, ROBERT NAME NAME STREET ADDRESS 314 DACAMA COURT STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP KISSIMMEE FL 34758 TITLE ☐ Delete Change ☐ Addition NAME SEALY, ALFRED NAME STREET ADDRESS **782 AMERICANA COURT** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE FL D ☐ Detete TITLE Change ☐ Addition HOLT, LAURA NAME NAME STREET ADDRESS 7605 AVIANO AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32819 TITLE TITLE ☐ Delete Change ☐ Addition NAME BUTLER, THIERRY L NAME STREET ADDRESS STREET ADDRESS 4451 KISSIMMEE PARK ROAD CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE FL

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.

DIMARYLU BUTLER