2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 14, 2002 8:00 am Secretary of State **DOCUMENT # 721619** 1. Entity Name FIRST ASSEMBLY OF GOD CHURCH OF CHIPLEY, FLA. IN 05-14-2002 90051 028 ****70.00 Principal Place of Business Mailing Address CHIPLEY FLORIDA INC. P.O. BOX 40 567 MAIN ST CHIPLEY FL 32428 CHIPLEY FLA 32428 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 59-2358665 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PARKER, THOMAS L-584 HWY, 279 FOUNTAIN FL 32438 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. ROSER LLANEY D, CFO SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD TITLE Delete TITLE X Change Addition PETTIS, DALLAS M NAME NAME SSY ASSEMBUL, ORINE STREET ADDRESS 2822 RIVER RD STREET ADDRESS CITY-ST-ZIP VERNON FL 32462 CITY-ST-7/P TITLE Delete TITLE Change **Addition** WALSINGHAM, RANDALL NAME COOK, CLESTUS NAME 640 MAIN STREE 1747 CANE MILL ROAD STREET ADDRESS STREET ADDRESS CITY-ST-7IP CHIPLEY FL 32428 CITY-ST-ZIP] CHIPLEL TITLE ☐ Delete TITLE ☐ Change Addition PARKER, THOMAS L NAME NAME 584 HWY 273 STREET ADDRESS STREET ADDRESS CHIPLEY FL 32428 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Addition ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 of the corporation or the receiver or trustee empor changed, or on an attachment with an address, wi ith all other like empowered.