2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2001 8:00 am
Secretary of State
07-18-2001 90260 043 ****61.25

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DOCUMENT # 730507

1. Entity Name

BROOKSVILLE ASSEMBLY OF GOD, INC., OF BROOKSVILL

Principal Place of Business	Mailing Address
20366 CORTEZ BLVD P.O. BOX 245 BROOKSVILLE FL 34605	20366 CORTEZ BLVD P.O. BOX 245 BROOKSVILLE FL 34605

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2240497 ☐ Applied For ☐ Not Applicable

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
GARCIA, DAVID A. 13407 BONITA AVE SPRING HILL FL 34609	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 _____
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	T HARDEMAN, STEVE 23450 CROOM RD BROOKSVILLE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T EBERT, SANDY 5142 HARBINGER RD SPRING HILL FL 34608	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TRUSTEE MARK FRAZIER 1526 ARNOLD AVE BROOKSVILLE, FL 34601 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T THORNTON, JOHN 10038 WEATHERLY RD BROOKSVILLE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P GARCIA, DAVID A 13407 BONITA AVE SPRING HILL FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BOLES, FLORA 1200 W JEFFERSON APT 22 BROOKSVILLE FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY SARAH PATRICK 1090 BLUFFS CIRCLE DUNEDIN, FL 34698 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T WOODRUFF, KEN 9371 WALLEN DR BROOKSVILLE FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER RAYMOND PITTS 2410 ANCHOR AVE SPRING HILL, FL 34608 ☒ Change ☐ Addition

CR2E037 (5/01)

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: David A. Garcia REQUIRED DAVID A. GARCIA 7-11-01 (352) 796-3685
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #