

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State

0088117

DOCUMENT # 730507

1. Entity Name

**BROOKSVILLE ASSEMBLY OF GOD, INC., OF BROOKSVILLE
 E, FLORIDA**

04-01-2002 90622 046 ****61.25

Principal Place of Business 20366 CORTEZ BLVD P.O. BOX 245 BROOKSVILLE FL 34605	Mailing Address 20366 CORTEZ BLVD P.O. BOX 245 BROOKSVILLE FL 34605
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 59-2240497	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**GARCIA, DAVID A.
 13407 BONITA AVE
 SPRING HILL FL 34609**

7. Name and Address of New Registered Agent

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 _____ (NOTE: Registered Agent signature required when reinstating) 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

TITILE NAME	HARDEMAN, STEVE <input type="checkbox"/> Delete
STREET ADDRESS	23450 CROOM RD
CITY-ST-ZIP	BROOKSVILLE FL
TITILE NAME	FRAZIER, MARK <input checked="" type="checkbox"/> Delete
STREET ADDRESS	1526 ARNOLD AVENUE
CITY-ST-ZIP	BROOKSVILLE FL 34601
TITILE NAME	THORNTON, JOHN <input type="checkbox"/> Delete
STREET ADDRESS	10038 WEATHERLY RD
CITY-ST-ZIP	BROOKSVILLE FL
TITILE NAME	GARCIA, DAVID A <input type="checkbox"/> Delete
STREET ADDRESS	13407 BONITA AVE
CITY-ST-ZIP	SPRING HILL FL
TITILE NAME	PATRICK, SARAH <input checked="" type="checkbox"/> Delete
STREET ADDRESS	1090 BLUFFS CIRCLE
CITY-ST-ZIP	DUNEDIN FL 34698
TITILE NAME	PITTS, RAYMOND <input checked="" type="checkbox"/> Delete
STREET ADDRESS	2410 ANCHOR AVENUE
CITY-ST-ZIP	SPRING HILL FL 34608

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITILE NAME	TRUSTEE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	FLORA BOLES
CITY-ST-ZIP	827 VILLAGE DR BROOKSVILLE, FL 34601
TITILE NAME	SECRETARY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	RICHARD LAMBRIGHT
CITY-ST-ZIP	220 SUNSET DR BROOKSVILLE, FL 34601
TITILE NAME	TRUSTEE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	KEN WOODRUFF
CITY-ST-ZIP	9371 WALLION DR BROOKSVILLE, FL 34601

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* **DAVID A. GARCIA** 3-13-02 (352) 796-3685

CR2E037 (9/01)