

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 14, 2003 8:00 am
Secretary of State

08-14-2003 90068 044 ****70.00

DOCUMENT # 732500

1. Entity Name
**THE CHURCH OF THE LIVING GOD WORLD WIDE REVIVAL
CENTER, INC**



Principal Place of Business

2643 S. 5TH AVE. SO.
ST. PETERSBURG FL 33712
US

Mailing Address

2643 S. 5TH AVE. SO.
ST. PETERSBURG FL 33712
US



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

2643-5th Ave. So.
Suite, Apt. #, etc.
US

3. Mailing Address

2643-5th Ave. So.
Suite, Apt. #, etc.
US

City & State
St. Petersburg Fla.
Zip
33712
County
Pinellas

City & State
St. Petersburg Fla.
Zip
33712
County
Pinellas

4. FEI Number **59-2949866**

Applied For

Not Applicable

5. Certificate of Status Desired **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

BUTLER, SAMUEL SR
THE CHURCH OF THE LIVING GOD WORSHIP
44422-3TH AVE SOUTH
SAINT PETERSBURG FL 33712

7. Name and Address of New Registered Agent

Name *Lorraine White*
Street Address (P.O. Box Number is Not Acceptable)
4141-13th Ave. So.
City *St. Petersburg* FL Zip Code *33713*

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Pastor Lorraine White* *Lorraine White* 8-6-03
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 10, 2003, min will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution.

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT BUTLER, SAMUEL JR. 11 WEST LOGAN AVE SAINT PAUL MN 55118	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT WHITE, LORRAINE 4442-3RD AVE SAINT PETERSBURG FL 33712	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COGER, OTIS L REV. 615 75TH S EAST PALMETTO FL 34221	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST PATTERSON, NADINE 1234 22ND STREET SOUTH SAINT PETERSBURG FL 33712	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ATD MCCRAY, DEBORAH 1954 BYRAM DR. CLEARWATER FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WESLEY, DORIS P/O. BOX 728 REDICK FL	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <i>Pastor Lorraine White</i> <i>4141-13th Ave So.</i> <i>St. Petersburg, Fla. 33713</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST <i>Brenda Grod</i> <i>1802 - Prescott</i> <i>St. Petersburg, Fla. 33712</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Samuel Butler* **SIGNATURE REQUIRED**

8-10-03 321-2613

CR2E037 (4/03)