2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 734469

1. Entity Name

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

BELIEVERS FELLOWSHIP, INC.

300 SW 6TH AVENUE P O BOX 653

Principal Place of Business

Mailing Address

300 SW 6TH AVENUE P O BOX 653 OKEECHOBEE FL 349 FILED Feb 28, 2001 8:00 am Secretary of State

02-28-2001 90076 035 ****61.25

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☐ Change

☐ Addition

OKEECHOBEE	FL 34973	OKEECHOBEE FL 34973			1.00001100	86 s(8) 8(8)8 d (12)			
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	59-1647484		olied For Applicable		
Zip	Country	Zip	Country		5. Certificate of	Certificate of Status Desired Sa.75 Additional Fee Required			
-	6. Name and Address of Currer	nt Registered Agent			7. Name and A	ddress of New Registe	ered Agent		
· 				Name					
ROY, LINDA D			<u> </u>	Street Address (P.O. Box Number is Not Acceptable)					
174 LAKE			-						
	BEE FL 34974		L						
			City				FL Zip Code	:	
8. The above	named entity submits this statement	for the purpose of changing i	ts registered	office or regis	stered agent, or both	in the state of Florida.			
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]									
SIGNATURE _	Signature, typed or printed name of registered ag	ent and title if applicable (NC	TE: Registered (gent signature regu	uired when reinstating)		DATE		
	Signature, typed or printed flame or registered ag	containd the it applicable. (AC		gon signature requ	anco when tendeding)	<u> </u>			
	FILE NOW:	9 Election Campai	an Einanoine	, ф Е		Maka Ch	ook Bayabla ta		ı
	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				ı
	1 22 10 401.20				and the state of t	2002.1.			
10.	OFFICERS AND	DIRECTORS	11.			NGES TO OFFICERS AI		10	-
TITLE	V	☐ Delete	TITLE NAME	P.	uau Hat	PKINS V. 344 TERR SE, FL 34	☐ Change	Addition 🔀	CR2E037 (10/00)
NAME	TANKERSLEY, LOUIS			IDDDTTOO I	HOK HOP	l	٦		
STREET ADDRESS CITY-ST-ZIP	1300 SE. 4 ST OKEECHOBEE FL 34973		CITY-S	ADDRESS /	7637 //. /	v. 37 - 12 ~	0.2.0	l	037
	D D	Delete		P	REECHOISE	JE, FL 34	Change	★ Addition	띯
TITLE NAME	LAW, JAMES	L_ Delete	TITLE NAME	14	OWARD I	3USBY 25= DRIV	L Gliange	Audition	ت
STREET ADDRESS	318 SW 30TH TERR			ADDRESS	1681 S.E.	254 DRIV	E		
CITY-ST-ZIP	OKEECHOBEE FL		CITY-S	ST-ZIP 0	KEECHOR	FE, FL 34	1974		1
TITLE	D	Delete	TITLE	5		7	☐ Change	Addition	
NAME	HOPKINS, JOSEPH		NAME	L.	INDA D.	Roy Drive WE			-
STREET ADDRESS	1014 NW 2ND STREET			ADDRESS	74 LAKE	DRIVE WES			
CITY-ST-ZIP	OKEECHOBEE FL 34972-394	4	CITY-:	ST-ZIP	OKEECHO	BEE, FL 3			-
TITLE	TD	☐ Delete	TITLE				☐ Change	☐ Addition	
NAME STREET ADDRESS	DURRANCE, WILLIAM J.		NAME	T ADDRESS					
CITY-ST-ZIP	1012 N.W. 2ND. STREET OKEECHOBEE FL 34972		CITY-						
TITLE	D D D D D D D D D D D D D D D D D D D	Delete	TITLE	+			☐ Change	☐ Addition	1
NAME	HANCOCK, HENRY	☐ Delete	NAME					☐ AUGITION	
STREET ADDRESS	14824 NW 34TH TERR			T ADDRESS					
CITY-\$T-ZIP	OKEECHOBEE FL			ST-ZIP					

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.

STREET ADDRESS CITY-ST-ZIP

TITLE NAME

☐ Delete

SIGNATURE: Junga U. Ruy LINDA D. Roy (SECRETARY) 2-20-01 863-763-2938