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

FILED
Feb 03, 2003 8:00 am
Secretary of State
02-03-2003 90308 031 ****70.00

DOCUMENT # 734674

1. Entity Name
SIMMONS PENTECOSTAL CHAPEL, INC.

Principal Place of Business	Mailing Address
7039 E HWY 318 CITRA FL 32113	PO BOX 21 ORANGE SPRINGS FL 32182 US

☐ CHECK HERE IF MAKING CHANGES

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 59-2246965 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired 1 **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DAVIS, LISA 10560 227TH ST ORANGE SPRINGS FL 32182 DELETE	Name: JESSE E. Head Street Address (P.O. Box Number is Not Acceptable): 12300 E. Hwy 318 City: Orange Springs **FL** Zip Code: 32182

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 Jesse E. Head P. 1-22-03
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

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	D NELSON, WILMA 967 CTY RD 21 HAWTHORNE FL 32640	☐ Delete	P Jesse E. Head P.O. Box 252 Orange Springs 32182	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCMILLIAN, FRANCIS PO BOX 122 CITRA FL 32113	☐ Delete	D Ganson, Glenda P.O. Box 380 Orange Springs, FL 32182	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DAVIS, GENE PO BOX 388 ORANGE SPRINGS FL 32182	☒ Delete	D Nichols, Laverne P.O. Box 202 Citra, FL 32113	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DAVIS, CLINT PO BOX 410 ORANGE SPRINGS FL 32182	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (10/02)

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: P. W SIGNATURE REQUIRED Wilma Nelson 1-22-2003 352-546-5989
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR