## **2001 UNIFORM BUSINESS REPORT (UBR) FILED** Apr 22, 2001 08:00 AM 749711 DOCUMENT # 1. Entity Name **Secretary of State** KINGS AVENUE BAPTIST CHURCH HOLDING CORPORATION, INC. Principal Place of Business Mailing Address 2602 S. KINGS AVENUE 2602 S. KINGS AVENUE BRANDON FL BRANDON 33511 33511 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 Applied For 59-1813663 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NASSAR FRED Street Address (P.O. Box Number is Not Acceptable) 2602 S. KINGS AVE BRANDON FL33511 US City 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. 04/22/2001 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) with the second FILE NOW: 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE ☐ Change ☐ Addition NAME HELLIER TOM NAME STREET ADDRESS STREET ADDRESS 2602 S KINGS AVE CITY-ST-ZIP CITY-ST-ZIP BRANDON FT. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STRICKLAND TERESA NAME STREET ADDRESS STREET ADDRESS 2602 S KINGS AVE CITY-ST-ZIP BRANDON FL. 33511 CITY-ST-ZIP TITLE TD Delete TITLE TD X Change ☐ Addition NAME DEAN JOSEPH NAME PHILLIPUS EDNA STREET ADDRESS STREET ADDRESS 2602 S. KINGS AVE 2602 S. KINGS AVE CITY-ST-ZIP CITY-ST-ZIP BRANDON BRANDON FL. 33511 FT. 33511 TITLE Delete TITLE Change Addition NAME NASSAR FRED NAME STREET ADDRESS 2602 S. KINGS AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BRANDON $\mathbf{FL}$ TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE Change 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.

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE: \_

NAME

STREET ADDRESS

CITY-ST-ZIP

FRED NASSAR

PD

04/22/2001

CR2E037 (11/00)