

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

FILED
Jun 04, 2003 8:00 am
Secretary of State

06-04-2003 90097 041 *****61.25

DOCUMENT # 750483

1. Entity Name

THE WORD OF GOD CHURCH OF THE PENTECOSTAL ASSEMBLIES OF THE WORLD, INC.



Principal Place of Business

**1733 MERCY DRIVE
ORLANDO FL 32808**

Mailing Address

**1733 MERCY DRIVE
ORLANDO FL 32808**

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 **59-2303041**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NEWTON, BILLY G.
306 NORTH DOLLINS AVENUE
ORLANDO FL 32805**

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

SIGNATURE

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	PD	☐ Delete
NAME	NEWTON, BILLY G.	
STREET ADDRESS	306 N. DOLLINS AVE.	
CITY-ST-ZIP	ORLANDO FL	
TITLE	SD	☐ Delete
NAME	PAUL, DELLA	
STREET ADDRESS	237 FANFARE AVE.	
CITY-ST-ZIP	ORLANDO, FL 00000	
TITLE	D	☐ Delete
NAME	GERALDINE, WILLIAMS	
STREET ADDRESS	214 S. COTTAGE HILL RD	
CITY-ST-ZIP	ORLANDO FL	
TITLE	D	☐ Delete
NAME	NEWTON, TOBE	
STREET ADDRESS	428 COTTAGE HILL RD.	
CITY-ST-ZIP	ORLANDO FL	
TITLE	D	☐ Delete
NAME	HOWELL, EDWARD L	
STREET ADDRESS	112 BANTRY DR	
CITY-ST-ZIP	LAKE MARY FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-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.

SIGNATURE: *Billy G. Newton* **6-2-03** **298-6324**

CR2E037 (10/02)