2002 UNIFORM BUSINESS REPORT (UBR)

2.

FILED
Mar 28, 2002 8:00 am
Secretary of State
02-05-2002 90108 050 ****70.00

DOCUMENT # 752395

1. Entity Name
HOPE COMMUNITY FELLOWSHIP
~~CATHEDRAL PINES~~ ASSEMBLY OF GOD, INC.

Principal Place of Business	Mailing Address
2929 OLD CHANEY HIGHWAY TITUSVILLE FL 32780	2929 OLD CHANEY HIGHWAY TITUSVILLE FL 32780

DO NOT WRITE IN THIS SPACE

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 59-2410749 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

~~GIBSON, RUFUS~~
2929 OLD CHANEY HWY
TITUSVILLE FL 32780

7. Name and Address of New Registered Agent

Name: TIMOTHY HARRIS
Street Address (P.O. Box Number is Not Acceptable): 2929 old Chewey Highway
~~Titusville~~
City: Titusville **FL** Zip Code: 32780

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.

SIGNATURE: Rev. Timothy Harris P.D. DATE: 3-11-02
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW: 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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MEDICA, MICHAEL 1500 E INTERNATIONAL SPEEDWAY BLVD DELAND FL 32724	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BABURN, TERRY PO BOX 24687 LAKELAND FL 33802	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST SIDNEY, TAYLOR 2651 BAYWOOD DRIVE TITUSVILLE FL 32780	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T POWELL, STEVE PO BOX 24687 LAKELAND FL 33802	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P.D. Timothy HARRIS 2929 Chewey Highway Titusville, Fl 32780	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: SIGNATURE REQUIRED 1/15/02 321-269-3700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #