2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#759083

P/D

Entity Name: CATHEDRAL OF PRAISE WORSHIP CENTER, INC.

FILED May 02, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4035 S.W. 18TH ST. 278 N.E. 35TH CT.

HOLLYWOOD, FL 33023 OAKLAND PARK, FL 33334

Current Mailing Address: New Mailing Address:

4035 S.W. 18TH ST 278 N.E. 35TH CT.

HOLLYWOOD, FL 33023 OAKLAND PARK, FL 33334

FEI Number: 65-0001787 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GIBSON, BARBARA L GIBSON, BARBARA L DR. 4035 S.W. 18TH ST. 278 N.E. 35TH CT.

HOLLWOOD, FL 33023 OAKLAND PARK, FL 33334 US US

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: DR. BARBARA GIBSON 05/02/2003

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete FRANCIS, BETTY J REV. FRANCIS, BETTY J BISHOP Name:

Name: 4035 S.W. 18TH ST. Address: 278 N.E. 35TH CT. Address:

City-St-Zip: HOLLYWOOD, FL 33023 City-St-Zip: OAKLAND PARK, FL 33334

Title: () Delete Title: (X) Change () Addition JENKINS, MARY REV. Name: JENKINS, MARY REV. Name:

Address: 4035 S.W. 18TH ST. Address: 278 N.E. 35TH CT. City-St-Zip: HOLLYWOOD, FL 33023 City-St-Zip: OAKLAND PARK, FL 33334

Title: () Delete Title: S/D (X) Change () Addition WILLIAMS, HATTIE REV. WILLIAMS, HATTIE REV. Name: Name:

4035 S.W. 18TH ST. Address: Address: 278 N.E. 35TH CT.

City-St-Zip: HOLLYWOOD, FL 33023 City-St-Zip: OAKLAND PARK, FL 33334

Title: T/D () Delete Title: T/D (X) Change () Addition

GIBSON, BARBARA DR. Name: Name: GIBSON, BARBARA DR. Address: 4035 S.W. 18TH ST. Address: 278 N.E. 35TH CT. City-St-Zip: HOLLYWOOD, FL 33023 City-St-Zip: OAKLAND PARK, FL 33334

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DR. BARBARA GIBSON T/D 05/02/2003