2000 UNIFORM BUSINESS REPORT (UBR)

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FILED **DOCUMENT # 771160** Jul 24, 2000 8:00 am 1. Entity Name **Secretary of State** ALL NATIONS CHURCH OF GOD BY FAITH, INC. 07-24-2000 90014 003 ****61.25 Principal Place of Business Mailing Address 3000 4TH AVE S 3850 9TH AVE. SO. ST. PETERSBURG FL 33711-2109 ST. PETERSBURG FL 33712 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc Applied For City & State City & State 4. FEI Number 59-2433685 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) WILLIAMS, JAMES E. 3850 NINTH AVENUE SOUTH ST. PETERSBURG FL 33711 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Addition TITLE TITLE Delete MINCY, JEREMIAH NAME NAME • • 810 38 AVE SO STREET ADDRESS STREET ADDRESS ٦: CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL ☐ Delete ☐ Change ☐ Addition TITLE TITLE WILLIAMS, JOHNNIE: L(PASTR= NAME* ordine trought missifand beid NAME ___ STREET ADDRESS STREET ADDRESS 3850 NINTH AVENUE SOUTH CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL VD TITLE ☐ Change ☐ Addition Delete TITLE WILLIAMS, JAMES E. NAME NAME STREET ADDRESS 3850 NINTH AVENUE SOUTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL ☐ Change ☐ Addition Delete TITLE BRADLEY, DOROTHY NAME NAME 2005 28TH STREET SOUTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL ☐ Addition Change TD TITLE Delete DAVIS, B. G. NAME NAME STREET ADDRESS STREET ADDRESS 1835 27TH STREET SOUTH CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL CD TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME wells, wayne NAME STREET ADDRESS STREET ADDRESS 1600 FAIRWAY AVE SO CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 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