

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 30, 2001 8:00 am
Secretary of State
 03-30-2001 90334 018 *****70.00

0001526

DOCUMENT # N00000008462

1. Entity Name

NEW BIRTH CHURCH OF GOD IN CHRIST, INC.

Principal Place of Business

**2804 3RD AVE. EAST
 PALMETTO FL 34221**

Mailing Address

**2804 3RD AVE. EAST
 PALMETTO FL 34221**

2. Principal Place of Business

2302 - 9th St. E.

3. Mailing Address

1710 - 4th Ave. W.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Bradenton, FL.

City & State

Palmetto, FL.

Zip

34208

Country

USA

Zip

34221

Country

USA

4. FEI Number

65-1048710

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**PETERSON, GARY T
 2804 3RD AVE. EAST
 PALMETTO FL 34221**

7. Name and Address of New Registered Agent

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.

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
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GORE, ANNIE O 1710 4TH AVE. WEST PALMETTO FL 34221	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MITCHELL, WILLIE P.O. BOX 1794 BRADENTON FL 34206	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LOWE-WASHINGTON, KARYN L 1020 26TH ST. CT. EAST BRADENTON FL 34221	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PETERSON, GARY T 2804 3 AVE. EAST PALMETTO FL 34221	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

SIGNATURE:

KARYN L. WASHINGTON 3/28/01 (941) 722-5475

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)