

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

FILED
Feb 27, 2003 8:00 am
Secretary of State

01-23-2003 90227 035 ****61.25

DOCUMENT # N02000001090

1. Entity Name

NEW LIFE COMMUNITY CHURCH OF PLANT CITY, INC.



Principal Place of Business

**807 E SANDALWOOD DR S
PLANT CITY FL 33567**

Mailing Address

**807 E SANDALWOOD DR S
PLANT CITY FL 33567**

2. Principal Place of Business

3. Mailing Address

PO. Box 5199

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Plant City, FL.

Zip

Country

Zip

Country

33564-5199

USA

4. FEI Number

01-0591005

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**HARROLD, FRED JR
807 E. SANDALWOOD DR S
PLANT CITY FL 33567**

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

SIGNATURE

Fred E. Harrold Jr.

1/20/03

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

TITLE **P/O** ☒ Delete
NAME **Kenneth RUSHING**
STREET ADDRESS **41313 LOUGFELLOW DR.**
CITY-ST-ZIP **Plant City, FL. 33566**

TITLE **S/O** ☒ Delete
NAME **CAROL ANN RUSHING**
STREET ADDRESS **41313 LOUGFELLOW DR.**
CITY-ST-ZIP **Plant City, FL. 33566**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **T/O** ☐ Change ☒ Addition
NAME **KAREN L. BENEFIELD**
STREET ADDRESS **3904 S. Heathroe Rd.**
CITY-ST-ZIP **Plant City, FL. 33567**

TITLE **P/O** ☒ Change ☐ Addition
NAME **FRED E. HARROLD JR.**
STREET ADDRESS **907 E. Sandalwood Dr S.**
CITY-ST-ZIP **Plant City, FL. 33563**

TITLE **S/O** ☒ Change ☐ Addition
NAME **CIMON J. Harrold**
STREET ADDRESS **907 E. Sandalwood Dr S.**
CITY-ST-ZIP **Plant City, FL. 33563**

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:

Fred E. Harrold Jr.

1/20/03

813-752-5729

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)