2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2002 8:00 am
Secretary of State
01-30-2002 90071 040 ****61.25

DOCUMENT # N07521

1. Entity Name

ROCK CHURCH OF DAYTONA BEACH, INC.

B0013061

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1818 TAYLOR RD. DAYTONA BEACH FL 32124-6783	1818 TAYLOR RD. DAYTONA BEACH FL 32124-6783

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip 32128 / Country	Zip 32128 / Country

4. FEI Number 59-2454925 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GORINI, FREDERICK D. 135 BROOKSIDE DR. DAYTONA BEACH FL 32124	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code 32128

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GORINI, FREDERICK D. 135 BROOKSIDE DR DAYTONA BEACH FL 32124	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 32128
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TDS LLOYD, AUTHUR E. JR. 1920 H L AINSLEY RD DAYTONA BEACH FL 32124	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition (spelling) LLOYD, ARTHUR E. Jr. 4159 Saddle Club Drive New Smyrna Beach, FL 32168
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CATALAND, GREG 5965 PARK RIDGE PORT ORANGE FL 32127	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 6337 Palmas Bay Circle
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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	☐ 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 Frederick D. Gorini 1/14/02 386-788-4540
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #