2001 UNIFORM BUSINESS REPORT (UBR)

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FILED
Jun 02, 2001 8:00 am
Secretary of State
04-30-2001 90394 032 ****70.20

DOCUMENT # N12120

1. Entity Name

HAVEN OF REST CHURCH OF RESTORATION, INC.

Principal Place of Business	Mailing Address
P.O. BOX 5914 MARIANNA FL 32446-5914	P.O. BOX 5914 MARIANNA FL 32446-5914

[redacted]

DO NOT WRITE IN THIS SPACE

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

4. FEI Number 26-7983624 ☐ 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
ROBINSON, MARGARET S 2834 BOOKER STREET MARIANNA FL 32446	Name Margaret S. Robinson Street Address (P.O. Box Number is Not Acceptable) 2834 Booker Street 2834 Booker Street City Marianna, FL FL Zip Code 32448

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 D NAME STREET ADDRESS CITY-ST-ZIP	D ROBINSON, JAMES JR 2834 BOOKER STREET MARIANNA FL	☑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Deceased ☐ Change ☐ Addition
TITLE PD NAME STREET ADDRESS CITY-ST-ZIP	PD ROBINSON, MARGARET S 2834 BOOKER STREET MARIANNA FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPEIGHT, WILLIAM 3171 E. MOSSMAN ROAD TUCSON AZ	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE D NAME STREET ADDRESS CITY-ST-ZIP	TERRY D. Clayton 1935 B. Hannah Street Marianna, Fl. 32448	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Waymon Speight Sr. 279 Grand Avenue Freeport, New York 11520	☐ 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 (10/00)

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: Margaret S. Robinson 4-15-2001 (850)482-4401
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #