

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 20, 2000 8:00 am
Secretary of State

01-20-2000 90142 030 ****70.00

DOCUMENT # N17738

1. Entity Name

PRAISE CATHEDRAL, CHURCH OF GOD, INC.

Principal Place of Business

Mailing Address

% MICHAEL J. THOMAS
 4371 76TH AVE NO
 PINELLAS PARK FL 33781
 US

% MICHAEL J. THOMAS
 4371 76TH AVE NO
 PINELLAS PARK FL 33781-3542
 US

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

59-2789116

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

THOMAS, MICHAEL J
 5533 81ST TERR NO
 PINELLAS PARK FL 33781

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

Michael J. Thomas, Senior Pastor

1-10-2000

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	☐ Delete
NAME	REINHART	
STREET ADDRESS	1159 45TH AVE NE	
CITY-ST-ZIP	ST PETERSBURG FL	
TITLE	D	☐ Delete
NAME	SHIELDS, STEPHEN	
STREET ADDRESS	12701 FRANK DR N	
CITY-ST-ZIP	SEMINOLE FL	
TITLE	D	☐ Delete
NAME	CUNNINGHAM, STEVE	
STREET ADDRESS	3236 8TH AVE N	
CITY-ST-ZIP	ST PETERSBURG FL 33713-662	
TITLE	D	☐ Delete
NAME	ROCKWELL, JIM	
STREET ADDRESS	2296 60TH ST NORTH	
CITY-ST-ZIP	ST. PETERSBURG FL 33710	
TITLE	D	☐ Delete
NAME	SWAFFORD, CARL	
STREET ADDRESS	4330 81ST AVE NORTH	
CITY-ST-ZIP	PINELLAS PARK FL	
TITLE	D	☐ Delete
NAME	THOMAS, MICHAEL	
STREET ADDRESS	5533 81ST TERRACE, NORTH	
CITY-ST-ZIP	PINELLAS PARK FL	

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	
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: *Michael J. Thomas*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-2000 727-544-3293

Date

Daytime Phone #

CR2E037 (9/99)