## 2003 NOT-FOR-PROFIT CORPORATION

## **UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT # N33801**

1. Entity Name



**FILED** Apr 02, 2003 8:00 am § Secretary of State

04-02-2003 90078 015 \*\*\*\*61.25

CHRISTIA	N LIFE CHURCH OF BREVAR	RD INC.							
Principal Place of Business 1018 PENNSYLVANIA AVE NE PALM BAY FL 32907 US		Mailing Address 1018 PENNSYLVANIA AVE NE PALM BAY FL 32907 US							
2 Principal F	Place of Business	3. Mailing Address							
		G. Maling Address					81811 81811 81811 BIBIT #1	81) B1B1) 1881	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF N	MAKING CHANGES		
City & State		City & State			4. FEI Number 65-0179766		———·	oplied For ot Applicable	
Zip	Country	Zip	Country		5. Certificate of S	tatus Desired	□ \$8.75 Add Fee Require		
	6. Name and Address of Current	Registered Agent			7. Name and Add	iress of New Regi	stered Agent		
Î LÂJÎÊ, LÛTHER'V'III				Name					
	NNSYLVANIA AVE NE		Street Address (P.O. Box Number			Not Acceptable)			
PALM BAY FL 32907									
1.00			City		<del></del>		FL Zip Cod	e	
8. The above	named entity submits this statement fo	r the purpose of changing its re	egistered office or	registere	ed agent, or both, in	the State of Florida	a. I am familiar with,	and accept	
the obligation	e named entity submits this statement to tions of registered agent.	į						1	
SĮGNATURE	alta word P	RESIDENT, DIRECTOR, TI	ansurer			3-	28-03		
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Agent signatu	re required	when reinstating)		DATE		
# · · · · · · · · · · · · · · · · · · ·	FILE NOW: FEE IS \$61.25	• 9. Election Camp Trust Fund Col			\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State				
10.	OFFICERS AND DIF	<del></del>	11.	Α	DOITIONS/CHANG	ES TO OFFICERS /			
NAME STREET ADDRESS CITY-ST-ZIP	TPD LAITE, LUTHER V III 1018 PENNSYLVANIA AVE NE PALM BAY FL 32907	Delete .	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TDD LAITE, PATRICIA J 1018 PENNSYLVANIA AVE NE PALM BAY FL 32907	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD5			Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MUNROE, AL 2214 JOSHUA DR., N.E. PALM BAY FL 32905	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T		ست ، سپرو	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	THUM DAY I'L GEGGG	☐ Delete	TITLE NAME STREET ADDRESS	DV BAKE 2839 PALM	R WARREN IB MORRIS BAY, FL 3	AVE,	☐ 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	
								-7	

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.

E REQUIRED

SIGNATURE:

03-28-03

(320) 729-000