2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2001 8:00 am
Secretary of State
05-21-2001 90369 048 ****70.00

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DOCUMENT # N35034

1. Entity Name

AMAZING GRACE APOSTOLIC CHURCH, INC.

Principal Place of Business	Mailing Address
AMAZING GRACE APOSTOLIC CHURCH 106 ROBBINS AVE. PORT ST. JOE FL 32456	6912 ROSS DRIVE PANAMA CITY FL 32404

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	417 NANCY DRIVE Suite, Apt. #, etc.
City & State	City & State: PANAMA CITY, FLA.
Zip / Country	Zip: 32404 / Country: USA

4. FEI Number: 59-3122740 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LOWERY, ROBERT
6912 ROSS DRIVE
PANAMA CITY FL 32404

7. Name and Address of New Registered Agent

Name: LOWERY, ROBERT
Street Address (P.O. Box Number is Not Acceptable): 417 NANCY DRIVE
City: PANAMA CITY FL Zip Code: 32404

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: Robert Lowery 5/11/01
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	PCM LOWERY, ROBERT 1911 E. 10TH ST. PANAMA CITY FL	☐ Delete	PCD LOWERY, ROBERT 417 NANCY DRIVE PANAMA CITY, FL. 32404	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LOWERY, AUDREY LOUISE 1911 E 10TH ST PANAMA CITY FL	☐ Delete	V/D LOWERY, AUDREY LOUISE 417 NANCY DRIVE PANAMA CITY, FL. 32404	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PT MCGLAND, KAREN 6708 ENZOR PANAMA CITY FL 32404	☐ Delete	D MCGLAND, KAREN 738 MARK DRIVE PANAMA CITY, FL 32404	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NICKSON, ALMETA 320 AVE E. PORT ST JOE FL 32457	☐ Delete	S/D DIXSON, ALICE FAYE 320 KENNY ST. PORT ST JOE, FL. 32456	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	T/M HOGUE, CLARENCE DOUGLAS 122 ROBBIN AVE PORT ST. JOE, FL. 32456	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ 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: Robert Lowery REQUIRED 5/11/01 850-914-9837