

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2000 8:00 am
Secretary of State

03-17-2000 90020 034 ****61.25

DOCUMENT # N94000001487
 1. Entity Name
WATSON TEMPLE CHURCH OF GOD IN CHRIST, INC.

Principal Place of Business 685 W GEORGIA ST TALLAHASSEE FL 32304 US	Mailing Address PO BOX 2576 TALLAHASSEE FL 32316-2576
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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 59-2415504	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 SHEPPARD, DONALD
 3103 S. FULMER CIR
 TALLAHASSEE FL 32303

7. Name and Address of New Registered Agent
 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

**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	
T NAME: STALLWORTH, THEOTIS STREET ADDRESS: 502 DUPONT DR CITY-ST-ZIP: TALLAHASSEE FL	<input type="checkbox"/> Delete
T NAME: STALLWORTH, FRANCIS STREET ADDRESS: 502 DUPONT DR CITY-ST-ZIP: TALLAHASSEE FL	<input type="checkbox"/> Delete
T NAME: SIMS, OBADIAH STREET ADDRESS: 1112 JOE LOUIS CITY-ST-ZIP: TALLAHASSEE FL	<input type="checkbox"/> Delete
TP NAME: SHEPPARD, DONALD STREET ADDRESS: 3103 S FULMER CIR CITY-ST-ZIP: TALLAHASSEE FL 32303	<input type="checkbox"/> Delete
S NAME: SIMS, WINIFRED E STREET ADDRESS: 1775 CENTERVILLE RD CITY-ST-ZIP: TALLAHASSEE FL 32308	<input type="checkbox"/> Delete
	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
T NAME: YOUNG, ESSIE STREET ADDRESS: 934 MILLARD STREET CITY-ST-ZIP: TALLAHASSEE, FL 32301	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
T NAME: COPPIN, GEOFFREY STREET ADDRESS: 5433 PINDERTON WAY CITY-ST-ZIP: TALLAHASSEE, FL 32311	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Winifred E. Sims* **WINIFRED E. SIMS** 3/15/00 850-386-3275
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)