

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000001739

1. Entity Name

ALL FAITHS CHURCH, INC.

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90367 010 ****61.25

Principal Place of Business

1140 LEE BLVD
#106
LEHIGH ACRES FL 33936
US

Mailing Address

1820 ROCKFORD BOULEVARD
LEHIGH ACRES FL 33936-5873



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

500 Joel Blvd
Suite, Apt. #, etc.
L

3. Mailing Address

205 Joel Blvd
Suite, Apt. #, etc.
#116

City & State

Lehigh Acres, FL

City & State

Lehigh Acres, FL

4. FEI Number

65-0648574

Applied For

Not Applicable

Zip

33972

Country

U.S.A.

Zip

33972

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HOSKINS, CHARLES
1820 ROCKFORD BOULEVARD
LEHIGH ACRES FL 33936

New Address

610 Gerald Ave
Apt #326
Lehigh Acres, FL 33972

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

Charles Hoskins, Charles Hoskins, President

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

TITLE PD
NAME HOSKINS, CHARLES
STREET ADDRESS 1820 ROCKFORD BOULEVARD
CITY-ST-ZIP LEHIGH ACRES FL 33936 ☐ Delete

TITLE D
NAME HOPPER, FLINT
STREET ADDRESS 310 JACKSON STREET
CITY-ST-ZIP LEHIGH ACRES FL 33936 ☐ Delete

TITLE D
NAME HOPPER, SUZETTE
STREET ADDRESS 310 JACKSON STREET
CITY-ST-ZIP LEHIGH ACRES FL 33936 ☒ Delete (Deceased)

TITLE STD
NAME HOSKINS, JOAN
STREET ADDRESS 1820 ROCKFORD BOULEVARD
CITY-ST-ZIP LEHIGH ACRES FL 33936 ☐ Delete

TITLE VD
NAME HOSKINS, WILLIAM
STREET ADDRESS 1820 ROCKFORD BOULEVARD
CITY-ST-ZIP LEHIGH ACRES FL 33936 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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:

Charles Hoskins, President 4-20-2000 (941)303-2046

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CF 1007 (9/99)