

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State

04-01-2002 90156 001 ****61.25

0010981

DOCUMENT # N97000007109
 1. Entity Name
SUNSET HARVEST FIRST PENTECOSTAL CHURCH, INC.

| | |
|---|---|
| Principal Place of Business 816 ALFRED ST TAVARES FL 32778 US | Mailing Address 3220 CR 511 WILDWOOD FL 34785 |
|---|---|



DO NOT WRITE IN THIS SPACE

| | |
|---|---|
| 2. Principal Place of Business Suite, Apt. #, etc. | 3. Mailing Address 361 W Alfred St Suite, Apt. #, etc. |
|---|---|

| | | |
|---|------------------------------------|--|
| City & State Tavares, Florida | 4. FEI Number 59-3602788 | Applied For <input type="checkbox"/> Not Applicable |
|---|------------------------------------|--|

| | | |
|---------------------|-----------------------|---|
| Zip 32778 | Country USA | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required |
|---------------------|-----------------------|---|

6. Name and Address of Current Registered Agent
**HUGHES, RICHARD W
 3220 CR 511
 WILDWOOD FL 34785**

7. Name and Address of New Registered Agent
 Name **Hughes, Richard W.**
 Street Address (P.O. Box Number is Not Acceptable)
361 W. Alfred St
 City **Tavares** FL Zip Code **32778**

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 *Dustin Hughes* **Dustin Hughes** *Same as above* **3-14-02**
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. <input type="checkbox"/> \$5.00 May Be Added to Fees | Make Check Payable to Department of State |
|---------------------------------|---|--|

10. OFFICERS AND DIRECTORS

| | | |
|--|--|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HUGHES, DUSTIN A 3220 CR 511 WILDWOOD FL 34785 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HUGHES, JESSICA E 3220 CR 511 WILDWOOD FL 34785 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HUGHES, RICHARD W 3220 CR 511 WILDWOOD FL 34785 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Hughes, Dustin A 361 W Alfred St Tavares FL 32778 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Hughes, Jessica E 361 W. Alfred St Tavares, FL 32778 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Hughes, Richard W 361 W. Alfred St Tavares, FL 32778 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <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: *Dustin Hughes* **Dustin Hughes** **3-14-02** **(352) 343-7767**
Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #

CR2E037 (9/01)