2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # 721086** Mar 29, 2000 8:00 am 1. Entity Name **Secretary of State** NORTH 56TH STREET GOSPEL CHAPEL, INC. 03-29-2000 90073 007 ****61.25 Principal Place of Business Mailing Address C/O P.L.C. PETERKIN N. 56TH STREET GOSPEL CHAPEL, INC. 12811 N. 56TH STREET 1111 N. BURTON STREET PLANT CITY FL 33566-3003 TEMPLE TERRACE FL 33617 3. Mailing Address 2., Principal Place of Business 55TH STREET GOSPEL CHAPEL INC 0 City & State 111 N. BURTON 87. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc 2811 N.56TH City & State VERRACE Applied For 4. FEI Number 59-1708618 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired U.S.A u.s.A Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) PETERKIN, P.L.C. 1111 N. BURTON STREET PLANT CITY FL 33566-3003 Zio Code City FL 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ■ Addition Delete TITLE, TITLE PETERKIN, PEMBROKE LC NAME NAME STREET ADDRESS 111 N. BURTO STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PLANT CITY FL 33566 DIRECTOR [] Change **Addition Delete** TITLE n TITLE CHAMBERS, CHESTER NAME ADAMS, A NAME 27950 SOUTHSHARE DR STREET ADDRESS STREET ADDRESS 339 FERNCLIFF AVE. CITY-ST-ZIP LAND O'LAWES, FL CITY-ST-ZIP TEMPLE TERR, FL 33617 DIRECTOR PRESIDENT ☐ Change Addition Addition TITLE DP Delete TITLE CITTENS LIVINGSTONE A 15835 SPRINGEREST CR NAME -NAME Balloon, Jerry STREET ADDRESS STREET ADDRESS 3415 E. FERN STREET CITY-ST-ZIP 33624 TAMPA FL CITY-ST-ZIP Tampa Fl DIRECTOR ☐ Change Addition TITLE TITLE D Delete FARMER. JOSEPH R NAME NAME FISHER, WILLIAM 1802 E HANNA STREET ADDRESS 7937 WOODVINE CIRCLE STREET ADDRESS City-ST-ZIP CITY-ST-ZIP TAMPA 33616 **TAMPA FL 33615** Change ☐ Addition ☐ Delete TITLE BROMFIELD, JOHN NAME STREET ADDRESS STREET ADDRESS 16202 PEBBLEBROOK DRIVE CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33624 Delete ☐ Change Addition TITLE NAME **BROWN, HUBERT** NAME STREET ADDRESS STREET ADDRESS 26649 GREEN WILLOW RUN CITY-ST-ZIP CITY-ST-ZIP WESLEY CHAPEL FL 33544 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 trusted empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE:

changed, or on an attachment with an a

Ith all other like empowered.

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR