

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 31, 2001 8:00 am**  
**Secretary of State**

07-31-2001 90230 020 \*\*\*\*75.00

**DOCUMENT # 748147**

1. Entity Name

**THE SEVEN HOURS HOLINESS CHURCH, INTERNATIONAL H**

Principal Place of Business

242 W 17 ST  
 JACKSONVILLE FL 32206  
 US

Mailing Address

242 W 17 ST  
 JACKSONVILLE FL 32206  
 US

2. Principal Place of Business

242 W 17 St  
 Suite, Apt. #, etc.

3. Mailing Address

242 W 17 St  
 Suite, Apt. #, etc.  
 Jacksonville Fla

City & State

Jacksonville Fla

City & State

32206 Duval

Zip

32206

Country

Duval

Zip

32206

Country

Duval

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CLARK, EVANG ETHEL E.  
 242 W 17 ST  
 JACKSONVILLE FL 32206

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

Evangel Ethel E Clark

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

After September 12, 2001, min. will be \$236.25

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	CLARK, ETHEL E., EVANG.	<input type="checkbox"/> Delete
NAME		242 WEST 17TH STREET	
STREET ADDRESS		JACKSONVILLE FL	
CITY-ST-ZIP			
TITLE	VD	MARTIN, MINNIE LEE	<input type="checkbox"/> Delete
NAME		1553 MT. HERMAN	
STREET ADDRESS		JACKSONVILLE FL	
CITY-ST-ZIP			
TITLE	TD	BURTON, MAGGIE LEE	<input type="checkbox"/> Delete
NAME		1513 DON CASTER AVENUE	
STREET ADDRESS		JACKSONVILLE FL	
CITY-ST-ZIP			
TITLE	D	SMITH, PEARLENA C.	<input type="checkbox"/> Delete
NAME		3617 ARDISIA RD.	
STREET ADDRESS		JACKSONVILLE FL	
CITY-ST-ZIP			
TITLE	D	DALLAS, MAGGIE J.	<input type="checkbox"/> Delete
NAME		802 COURT "E"	
STREET ADDRESS		JACKSONVILLE FL	
CITY-ST-ZIP			
TITLE	SD	ANDREWS, ESTELLER H	<input type="checkbox"/> Delete
NAME		641 FERN STREET	
STREET ADDRESS		JACKSONVILLE FL	
CITY-ST-ZIP			

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	Evangel Ethel E Clark	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		242 W 17 St	
STREET ADDRESS		Jacksonville Fla	
CITY-ST-ZIP			
TITLE	VD	Minnie Lee Martin	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1553 Mt. Herman	
STREET ADDRESS		Jacksonville Fla	
CITY-ST-ZIP			
TITLE	TD	Maggie Lee Burton	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1513 Don Caster Avenue	
STREET ADDRESS		Jacksonville Fla	
CITY-ST-ZIP			
TITLE	D	Pearlene C Smith	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3617 Ardisia Rd.	
STREET ADDRESS		Jacksonville Fla	
CITY-ST-ZIP			
TITLE	D	Maggie J Dallas	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		802 Court E	
STREET ADDRESS		Jacksonville Fla	
CITY-ST-ZIP			
TITLE	SD	Esteller H Andrews	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		641 Fern St	
STREET ADDRESS		Jacksonville Fla	
CITY-ST-ZIP			

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:

Evangel Ethel E Clark

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 7/31/2001

CR2E037 (5/01)