

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 21, 2002 8:00 am
Secretary of State

07-21-2002 90013 034 ****75.00

DOCUMENT # 748147
1. Entity Name THE SEVENTH HOUR HOLINESS CHURCH
HOUSE OF ISRAEL HOLY PRAYER BAND
& POWER INTERNATIONAL INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 242 W 17 St
Suite, Apt. #, etc. Jacksonville Fla
City & State Orual
Zip 32206 Country

3. Mailing Address 242 W 17 St
Suite, Apt. #, etc. Jacksonville
City & State Fla
Zip 32206 Country Orual

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent
Name Evang Ethel Clark
Street Address (P.O. Box Number is Not Acceptable) 242 W 17 St
Jacksonville Fla 32206
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 Evang Ethel Clark Not Profit Corporation 7-15-2002
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS \$61.25
Initial or Amended UBR

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 NAME STREET ADDRESS CITY-ST-ZIP	<u>PRESIDENT</u> <u>EVANGELIST ETHAL CLARK</u> <u>242 W 17th ST.</u> <u>JAX FLA 32206</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>VICE PRESIDENT</u> <u>LEROY SHEFFIELD</u> <u>3203 RHONE DR.</u> <u>JAX. FLA. 32208</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>SECRETARY</u> <u>MAGGIE LEE FELDER</u> <u>5013 DONCASTER AVE.</u> <u>JAX. FLA. 32208</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>S. TREASURER</u> <u>FAYE TYSON</u> <u>5670 SHADY PINE ST. S.</u> <u>JAX. FLA. 32244</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>DIRECTOR</u> <u>ALBERT A. PINKNEY</u> <u>924 W. 29th ST.</u> <u>JAX. FLA. 32209</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>DIRECTOR</u> <u>REGINALD BRIDGES</u> <u>1107 TAYLOR ST.</u> <u>JAX. FLA. 32204</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE Evang Ethel Clark

7-15-2002

CR2E037B (12/01)

Attachment July 15. 2002

B0130266

Dear Sir: # 748147

To Whome this Concern I Evang
Ethel^{Clark} is writing to let you know
I didn't Receive My Annual Report
paper. I Call for these paper
and they are Blank I had to
fill them out. I hope I will
make sure to send them early
next time and send them Special
Deliver. Where I will get them
Thank you From Evang Ethel Clark

242 W 17 St

Jacksonville Fla

32206