## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N01000005682

Entity Name: THE CARPENTER'S SHOP CHURCH, INC.

FILED Feb 12, 2003 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:	
4183 OLD MILL OVE TRAIL WEST JACKSONVILLE, FL 32277					
Current Mailing Address:			New Mailir	New Mailing Address:	
4183 OLD MILL OVE TRAIL WEST JACKSONVILLE, FL 32277					
FEI Number: 41-2028797 FEI Number Applied For ( ) FEI Number		l Number Not Appli	cable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
WILDER, CLINT D 4183 OLD MILL OVE TRAIL WEST JACKSONVILLE, FL 32277 US					
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:					
Electronic Signature of Registered Agent			Date		
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	WILDER, CHERY	OVE TRAIL WEST	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition WILDER, CHERYL D 4183 OLD MILL OVE TRAIL WEST JACKSONVILLE, FL 32277	
Title: Name: Address: City-St-Zip:	PRES () E WILDER, CLINT 4183 OLD MILL G JACKSONVILLE,	COVE TR W	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () E WILDER, MARY 4183 OLD MILL O JACKSONVILLE,	COVE TR W	Title: Name: Address: City-St-Zip:	TR (X) Change ( ) Addition PARKS, KELLY 5370 COPPEDGE AVE. JACKSONVILLE, FL 32277	
Title: Name: Address: City-St-Zip:	D () E COX, EDWARD H 1610 DONALD S' JACKSONVILLE,	Г	Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	D ()E BOLDUC, GAYLO 8821 NATURE VI JACKSONVILLE,	EW LANE WEST	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition PARKS, TERRY 5370 COPPEDGE AVE. JACKSONVILLE, FL 32277	
Title: Name: Address: City-St-Zip:	D ()E COX, BETTY S 1610 DONALD S JACKSONVILLE		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLINT D. WILDER PRES 02/12/2003