## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## Feb 20, 2003 8:00 am Secretary of State **DOCUMENT # 729790** 02-20-2003 90127 005 \*\*\*\*61.25 KOREAN BAPTIST CHURCH OF TAMPA, INC. Principal Place of Business Mailing Address 6020 NORTH CHURCH AVENUE 6020 NORTH CHURCH AVENUE TAMPA FL 33614-5602 TAMPA FL 33614-5602 2.-Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-1656411 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LEE, DANIEL Street Address (P.O. Box Number is Not Acceptable) 3706 W. IDLEWILD AVE #907 TAMPA FL 33614 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. I am familiar with, and accept the obligations of registered agent. 9. Election Campaign Financing FILE NOW: FEE 16 \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE ☐ Change Addition LEE. DANIEL NAME 3706 W. IDLE WILD AVE . #907 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **TAMPA FL 33614** CITY-ST-ZIP TD Delete TITLE TD Addition LEE. KULTON Kim, JEONGOK 3040 EASTLAND BIVD. 3G208 CLEARWATER FL 33761 NAME 3612 CARROLWOOD LACE CIR #I-308 STREET ADDRESS STREET ADDRESS CITY-ST-ZIF **TAMPA FL 33624** CITY-ST-ZIP TITLE SD ☑ Delete TITLE ☐ Addition JEONGOK, KIM NAME NAME RO, AERA STREET ADDRESS 3040 EASTLAND BLVD , 3G208 STREET ADDRESS 1807 APACH TRIAL CITY-ST-ZIP CLEARWATER FL 33761 CITY-ST-ZIP CLEARWATER FL 346 ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE - Addition NAME NAME STREET ADDRESS

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

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Delete

2/9/2003 (8/3) Aff-99

☐ Change

☐ Addition

FILED