

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 14, 2002 8:00 am**  
**Secretary of State**

03-14-2002 90349 001 \*\*\*122.50

**DOCUMENT # 703083**

1. Entity Name

**"FIRST ASSEMBLY OF GOD CHURCH OF CLEARWATER, INC.**

Principal Place of Business

1739 S. GREENWOOD AVE  
 CLEARWATER FL 34616  
 US

Mailing Address

1739 S. GREENWOOD AVE  
 CLEARWATER FL 34616  
 US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-1218816**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**LAMBERT, STEVEN**  
**1739 S GREENWOOD AVE**  
**CLEARWATER FL 34616**

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

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**

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	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>BAKER, WILLIAM</b>	
STREET ADDRESS	<b>1022 BROOKSIDE DR</b>	
CITY-ST-ZIP	<b>CLEARWATER FL 33764</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>WELD, LARRY</b>	
STREET ADDRESS	<b>29742 66TH WAY N</b>	
CITY-ST-ZIP	<b>CLEARWATER FL 33761</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>KISTNER, GARY</b>	
STREET ADDRESS	<b>10251 135TH ST N</b>	
CITY-ST-ZIP	<b>LARGO FL 33774</b>	
TITLE	<b>P</b>	<input type="checkbox"/> Delete
NAME	<b>LAMBERT, STEVE</b>	
STREET ADDRESS	<b>1739 S GREENWOOD AVE</b>	
CITY-ST-ZIP	<b>CLEARWATER FL</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>KRIEVER, BLAIR</b>	
STREET ADDRESS	<b>1351 FAIRFIELD DR</b>	
CITY-ST-ZIP	<b>CLEARWATER FL 33764</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>John Siktberg</b>	
STREET ADDRESS	<b>14367 - 87th Ave North</b>	
CITY-ST-ZIP	<b>SEMINOLE, FL 33776</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Neller, Wes</b>	
STREET ADDRESS	<b>3463 Glossy Ibis Court</b>	
CITY-ST-ZIP	<b>PALM HARBOR, FL 34683</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Levy, Leroy</b>	
STREET ADDRESS	<b>4636 JUNPER DR.</b>	
CITY-ST-ZIP	<b>PALM HARBOR, FL 34685</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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: **Steve Lambert** 2-27-02 (727)585-5468

CR2E037 (9/01)