FILED

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

Jan 16, 2003 8:00 am Secretary of State DOCUMENT # 703292 1. Entity Name 01-16-2003 90107 046 ****61.25 FIRST ASSEMBLY OF GOD, INC. OF MELBOURNE, FLORID Principal Place of Business Mailing Address GARY T CRISTOFORO 801 MASTERSON ST. 2068 PINEAPPLE AVENUE MELBOURNE FL 32935 MELBOURNE FL 32935 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 59-2393289 Applied For 1e1600 tlorida Not Applicable ·Zip Country 3293*5* 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CRISTOFARO, GARY T Street Address (P.O. Box Number is Not Acceptable) 113 KRISTI DRIVE IND HAR BCH FL 32937 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. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. П Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 VD ☐ Delete TITLE ☐ Change Addition JOSEPH, JEFF NAME NAME 399 LAKE VICTORIA DRIVE STREET ADDRESS STREET ADDRESS **CR2E037** CITY-ST-ZIP MELBOURNE FL 32940 CITY-ST-ZIP SD TITLE ☐ Delete TITLE Change ☐ Addition NAME LOWE, ROBERT NAME STREET ADDRESS 204 VERSAILLES DR STREET ADDRESS CITY-ST-ZIP MELBOURNE BEACH FL 32951 CITY-ST-ZIP TITLE Delete Change ☐ Addition THOMPSON. DAVID NAME 9000 SCARSDALE COURT C & D STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST MELBOURNE FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition CRISTOFARO, GARY NAME NAME 113 KRISTI DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP IND HAR BCH FL 32937 CITY-ST-ZIP ☐ Delete Board Manber TITLE Addition ☐ Change NAME Brian Mahoney 1971 Tall Oak Road NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Melbourne, 71 3-2135 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME

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

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

321-254-3266