

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 19, 2001 8:00 am
Secretary of State

03-19-2001 90043 015 ****61.25

0085080

DOCUMENT # 703317

1. Entity Name

CHURCH OF GOD OF PROPHECY OF WINTER GARDEN, INC.

Principal Place of Business

1320 S 9TH ST
 WINTER GARDEN FL 34787
 US

Mailing Address

1320 S 9TH ST
 WINTER GARDEN FL 34787
 US

2. Principal Place of Business

Same AS Above

3. Mailing Address

P.O. Box. 783141

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

WINTER GARDEN FL.

4. FEI Number

59-2373483

Applied For

Not Applicable

Zip

Country

Zip

Country

34787 ORANGE

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

PERRY, HARRY GREG
674 PALM AVE
WINTER GARDEN FL 34787

7. Name and Address of New Registered Agent

Name **KENNETH C. KINCAID**

Street Address (P.O. Box Number is Not Acceptable)
2309 EASTWICK ST.

City **ORLANDO**

FL

Zip Code **32837**

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 *HARRY GREG PERRY*
 Signature, typed or printed name of registered agent and title if applicable.

03/06/01

(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 **OD** ☒ Delete
 NAME **PERRY, HARRY GREG**
 STREET ADDRESS **674 PALM AVE**
 CITY-ST-ZIP **WINTER GARDEN FL 34787**

TITLE **OD** ☐ Delete
 NAME **MESSER, HENRY H**
 STREET ADDRESS **8417 LONMAN AVE**
 CITY-ST-ZIP **ORLANDO FL 32818**

TITLE **OD** ☐ Delete
 NAME **MOSS, HERBERT**
 STREET ADDRESS **553 PALM DRIVE**
 CITY-ST-ZIP **WINTER GARDEN FL 34787**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **OD** ☐ Change ☒ Addition
 NAME **KENNETH C. KINCAID**
 STREET ADDRESS **2309 EASTWICK ST.**
 CITY-ST-ZIP **ORLANDO, FL. 32837**

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

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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: *HENRY H. MESSER*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date *4/14/01* Daytime Phone # *407-293-3186*

CR2E037 (10/00)