

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 706615

1. Entity Name

PRAISE CHAPEL, INC.

P

FILED
Sep 13, 2000 8:00 am
Secretary of State

09-13-2000 90013 004 ****70.00

Principal Place of Business

25022 NW 122 AVE
HIGH SPRINGS FL 32643

Mailing Address

25022 NW 122 AVE
HIGH SPRINGS FL 32643

2. Principal Place of Business

25022 N.W. 122 Ave

3. Mailing Address

25022 N.W. 122 Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

High Springs, FL

City & State

High Springs, FL

4. FEI Number

59-1819902

Applied For

Not Applicable

Zip

32643

Country

Alachua

Zip

32643

Country

Alachua

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MULLINS, KENNETH
25022 NW 122 AVE
HIGH SPRINGS FL 32643

7. Name and Address of New Registered Agent

Name

KENNETH E. MULLINS

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

25022 N.W. 122 Ave.

City

High Springs

FL

Zip Code

32643

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
After September 13, 2000 min. will be \$236.25

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 PD ☐ Delete
NAME MULLINS, KENNETH
STREET ADDRESS RT. 2, BOX 350H
CITY-ST-ZIP SARASOTA FL

TITLE S ☐ Delete
NAME MULLINS, KAY
STREET ADDRESS RT. 2, BOX 350H
CITY-ST-ZIP SARASOTA FL

TITLE OD ☐ Delete
NAME HOWELL, RENEE L.
STREET ADDRESS 2802 11TH AVENUE, WEST
CITY-ST-ZIP BRADENTON FL

TITLE D ☐ Delete
NAME MULLINS, KENNETH E JR
STREET ADDRESS RT. 3 BOX 79A
CITY-ST-ZIP NEWTON KS 67114

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 ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

Kenneth E. Mullins Kenneth E. Mullins 9/12/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/00)