

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

**FILED**  
**May 06, 2002 8:00 am**  
**Secretary of State**

05-06-2002 90175 018 \*\*\*\*61.25

DOCUMENT # 712288 ✓

1. Entity Name

FIRST PENTECOSTAL CHURCH OF SOUTH BREVARD, INC.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

1021 EMERSON DR. NE

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

PALM BAY FLORIDA

City & State

~~FLORIDA~~

4. FEI Number

59-2264985

Applied For

Not Applicable

Zip

32907

Country

BREVARD

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

7. Name and Address of Current Registered Agent

Name

DAVID E. MYERS

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

612 ROSTOCK CIR

City

PALM BAY

FL

Zip Code

32907

**DO NOT WRITE  
IN THIS SPACE**

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

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

MADE CHECK PAYABLE TO  
DEPARTMENT OF STATE

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	SEC. / TREASURER RICHARD T. JENKINS 1495 DONNA MARIE DR. W. MELBOURNE, FL 32904	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KENNETH SIAS 921 BURN AVE NE PALM BAY, FL 32905	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D RICHARD SIAS 1679 MOSSWOOD DR. MELB., FL 32935	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ALLYN SAUNDERS 3091 MARY ST. W. MELB., FL 32904	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TIM RITCHIE 229 TIMPOOCHEE SATELLITE BEACH, FL 32937	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D STEVE GALEY 945 STARLING WAY ROCKLEDGE, FL 32955	TITLE 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

DAVID MYERS

4-22-02