

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2002 8:00 am
Secretary of State

0041739

DOCUMENT # 722345

1. Entity Name

THE HOLY GHOST CHURCH OF GOD PURCHASED WITH HIS BLOOD INC.

01-31-2002 90095 001 ****61.25

01-31-2002 90095 002 *****8.75

Principal Place of Business

Mailing Address

2901 5TH AVENUE SOUTH
 ST. PETERSBURG FL 33712
 US

782 64TH AVE. SOUTH
 ST. PETERSBURG FL 33705-5922
 US

11529

2. Principal Place of Business

2901 5th Ave. South

3. Mailing Address

782 64th Ave South

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

ST Petersburg FL

City & State

ST Petersburg FL

4. FEI Number

23-7168635

Applied For

Not Applicable

Zip

33712

Country

USA. Florida

Zip

33705

Country

USA

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

HOLCY, WILLIE D BISHOP
 782 64TH AVE SOUTH
 ST. PETERSBURG FL 33705

Name Bishop Willie D Holcy

Street Address (P.O. Box Number is Not Acceptable)
 782 64th Ave South

City

St Petersburg

FL

Zip Code

33705

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

Bishop Willie D. Holcy

1/14/2002

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PMD
 NAME HOLCY, WILLIE D.(BISHOP)
 STREET ADDRESS 782 64 AVE S
 CITY-ST-ZIP ST. PETE. FL ☐ Delete

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

TITLE STM
 NAME HOLCY, ARIE LEE
 STREET ADDRESS 782 64 AVE S
 CITY-ST-ZIP ST. PETE. FL ☐ Delete

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

TITLE M
 NAME RIVERS, PATRICIA ANN
 STREET ADDRESS 3026 EMERSON AVENUE SO.
 CITY-ST-ZIP ST. PETE. FL ☐ Delete

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

TITLE D
 NAME ANDREW, ISAAC
 STREET ADDRESS 6911 BONAIR DRIVE, D
 CITY-ST-ZIP TAMPA FL ☐ Delete

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

TITLE D
 NAME DANIELS, WILLIAM H.
 STREET ADDRESS 2501 22 AVE S
 CITY-ST-ZIP ST PETE FL ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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

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:

SIGNATURE REQUIRED

Bishop Willie D Holcy CHAYMAN of
 1/14/2002 Board 727-864-0046

CR2E037 (9/01)