

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90366 049 *****61.25

0076816

DOCUMENT # 727250

1. Entity Name

THE FIRST ASSEMBLY OF GOD OF ARCADIA, INC.

Principal Place of Business

201 N 11TH AVE
ARCADIA FL 34266
US

Mailing Address

201 N 11TH AVE
ARCADIA FL 34266
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1899982

Applied For

Not Applicable

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

BRANCH, WALTER T
403 E. PINE ST
ARCADIA FL 34266

Name

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

City

FL

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.

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 \$61.259. 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
NAME
STREET ADDRESS
CITY-ST-ZIP
V
CLAY, JAMES
6282 NNE RANCH DR
ARCADIA FL 34266 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
VAN AKEN, JEFF
2884 NW CR 661
ARCADIA, FL 00000 34266 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BRANCH, WALTER T
403 E PINE ST
ARCADIA FL 34266 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
PRIEST, CHARLES
P. O. BOX 509 N/A
NOCATEE FL 33864 ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Dan Haupt
1423 S.E. C.R. 760A
Arcadia FL. 34266 ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Char Mares
1467 N.E. Lee Dr.
Arcadia FL. 34266 ☐ 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:

Jeff VanAken

SIGNATURE REQUIRED

4/30/01

863-494-0616

CR2E037 (10/00)