FILED

## 2001 UNIFORM BUSINESS REPORT (UBR)

## Jan 29, 2001 8:00 am Secretary of State **DOCUMENT # 728730** 1. Entity Name GOLF VIEW PARK REVIVAL TABERNACLE, INC. 01-29-2001 90132 015 \*\*\*\*61 25 Principal Place of Business Mailing Address GOLFVIEW PARK REVIVAL TABERNACLE INC % REV. ROBERT HARE P O BOX 1054 P.O. BOX 1054 LAKE WALES FL 33859-1054 LAKE WALES FL 33859-1054 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1525978 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) HARE, ROBERT REV. 3032 CEDAR ST. LAKE WALES FL 33859-8054 City Zip Code FL 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be **FEE IS \$61.25** Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Director TITLE ☐ Delete TITLE ☐ Change Addition mmy Coatnes NAME HARE, DELORES NAME 10 Hickory Hammock land STREET ADDRESS 3032 CEDAR ST STREET ADDRESS CITY-ST-ZIP LAKE WALES FL CITY-ST-ZIP ee Wales Florida 33853 TITLE ☐ Delete TITLE Change Addition BRANNEN, RONNIE NAME NAME Boy Scout Road STREET ADDRESS 508 SOUTH 8TH ST STREET ADDRESS ake Wales, Florida 33853 CITY-ST-ZIP CITY-ST-ZIP LAKE WALES FL Change Addition lenora miles TITLE Delete BARNETT, ORVILLE 2807 Begonia aven NAME NAME STREET ADDRESS 207 BABSON PARK DR STREET ADDRESS Lake Wales Florida CITY-ST-7IP **BABSON PARK FL** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition HARE, KENNETH NAME NAME STREET ADDRESS 3032 CEDAR ST . STREET ADDRESS CITY-ST-ZIP LAKE WALES FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition HARE, ROBERT REV. NAME NAME STREET ADDRESS 3032 CEDAR ST STREET ADDRESS CITY-ST-ZIP LAKE WALES FL CITY-ST-ZIP ST TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STARLING, BARBARA NAME STREET ADDRESS 200 PINEY ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE WALES FL 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

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changed, or on an attachment with an address, with all other like empowered.