2002 UNIFORM BUSINESS REPORT (UBR)

Feb 19, 2002 8:00 am Secretary of State **DOCUMENT # 731798** 1. Entity Name 02-19-2002 90117 006 ****61.50 "S" AVENUE CHURCH OF CHRIST OF RIVIERA BEACH, IN C. Principal Place of Business Mailing Address 2120 AVENUE "S" 2120 AVENUE "S" RIVIERA BEACH FL 33404 RIVIERA BEACH FL 33404 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-1687746 Not Applicable Zip Country \$8.75 Additional Zip П 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) YOUNG, JONATHAN B 500 CRESTWOOD COURT NORTH, #502 **ROYAL PALM BEACH FL 33411** 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 (NOTE: Registered Agent signature required when reinstating) DATE Stonature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing Make Check Pavable to **\$5.00** May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10 ☐ Addition Change ☐ Delete TITLE •iTLE young, Jonathan B NAME NAME STREET ADDRESS 500 CRESTWOOD CORUT NORTH, #502 STREET ADDRESS CITY-ST-ZIP **ROYAL PALM BEACH FL 33411** CITY-ST-ZIP vpt Change ☐ Addition ☐ Delete TITLE TITLE SMITH, CLINTON NAME NAME STREET ADDRESS 461 W. 32ND STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP RIVIERA BEACH FL 33404 Change ☐ Addition TITLE Delete TITLE NAPIER, JESSIE NAME NAME 1620 W. 33RD STREET STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **RIVIERA BEACH FL 33404** Change ☐ Addition TITLE TITLE Delete WEAVER, LARRY NAME NAME STREET ADDRESS STREET ADDRESS 401 W. 33RD ST. CITY-ST-ZIP CITY-ST-7IP **RIVIERA BEACH FL 33404** Change Addition ATT TITLE ☐ Delete TITLE DE GRAFFENREIDT. ANDREW NAME NAME STREET ADDRESS STREET ADDRESS 508 CYPRESS DR. CITY-ST-7IP CITY-ST-ZIP LAKE PARK FL 33403 ☐ Addition ☐ Change TITLE ☐ Delete TITLE. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

changed, or on an attachment with an address, with all other like empowered. 1/27/02 561-714-7592 SIGNATURE: JONATHAN B. YOUNGE

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

FILED