2001 UNIFORM BUSINESS REPORT (UBR)

Apr 10, 2001 8:00 am Secretary of State **DOCUMENT # 733861** 1. Entity Name APOSTLES OF LIGHT, INC. 04-10-2001 90002 037 ****61.25 Principal Place of Business Mailing Address 2944 NOVUS STREET 2944 NOVUS STREET SARASOTA FL 34237 SARASOTA FL 34237 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. FE! Number Applied For 59-1626754 Not Applicable Zip Country Zip 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 Name Street Address (P.O. Box Number is Not Acceptable) MOSELEY, THOMAS 1111 9TH AVENUE WEST, SUITE E Zip Code **BRADENTON FL 34205** 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) **FILE NOW:** 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE ☐ Delete TITLE Change Addition FAITHFUL. MYRTLE B NAME NAME 2944 NOVUS ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 00000 CITY-ST-ZIP TITLE TITLE ☐ Delete Change Addition MONSON, LINDA S. NAME NAME STREET ADDRESS 4112 WEST 17TH AVE STREET ADDRESS CITY-ST-ZIP BRADENTON FL CITY-ST-ZIP TITLE TITI F Delete ☐ Change ☐ Addition NAME JACOBS, DORENE A. NAME STREET ADDRESS 2811 TULANE AVE. STREET ADDRESS CITY-ST-7IP **BRADENTON FL** CITY-ST-ZIP TITLE STD TITLE ☐ Delete ☐ Change ☐ Addition PAYNOVICH, PAUL I. NAME NAME STREET ADDRESS 2425 VALENCIA DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34239 TITLE ☐ Delete TITLE ☐ Change ■ Addition HILL, JANICE E NAME NAME STREET ADDRESS 3309 21ST AVE W STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BRADENTON, FL 00000 TITLE ☐ Delete TITLE Change ☐ Addition NAME HAINES, AILEEN C. NAME STREET ADDRESS STREET ADDRESS 3806 34TH AVE W CITY-ST-ZIP CITY-ST-ZIP BRADENTON, FL 00000 34203 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.