

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 02, 2001 8:00 am
Secretary of State

02-02-2001 90301 050 ****61.25

DOCUMENT # 734992

1. Entity Name

JEREMIAH CHURCH FOR ALL PEOPLES, INC.

Principal Place of Business

**STAR ROUTE 1, BOX 858
 WALDO FL 32694**

Mailing Address

**19303 NE 114TH AVE
 WALDO FL 32694**

2. Principal Place of Business

19303 N.E. 114 Ave

3. Mailing Address

Suite, Apt. #, etc.

City & State

Waldo Fla.

City & State

Zip

Country

326-94

4. FEI Number

05-0065400

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**BARRINGTON, ELLIOTT PRESTON JR.
 STAR ROUTE 1, BOX 858
 WALDO FL 32694**

7. Name and Address of New Registered Agent

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

Rev. Elliott P. Barrington, Jr.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-29-01

**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

TITLE **PD** ☐ Delete
 NAME **BARRINGTON, ELLIOTT P. JR**
 STREET ADDRESS **STAR ROUTE 1, BOX 858**
 CITY-ST-ZIP **WALDO FL**

TITLE **VD** ☐ Delete
 NAME **BARRINGTON E P III**
 STREET ADDRESS **STAR ROUTE 1, BOX 858**
 CITY-ST-ZIP **WALDO FL**

TITLE **SD** ☐ Delete
 NAME **BARRINGTON, DOLLIE ANN**
 STREET ADDRESS **STAR ROUTE 1, BOX 858**
 CITY-ST-ZIP **WALDO FL**

TITLE **AS** ☐ Delete
 NAME **BARRINGTON, ELIZABETH A**
 STREET ADDRESS **STAR RT. 1, BOX 858**
 CITY-ST-ZIP **WALDO FL 32694**

TITLE **T** ☐ Delete
 NAME **BARRINGTON, MARIA E**
 STREET ADDRESS **STAR RT. 1, BOX 858**
 CITY-ST-ZIP **WALDO FL 32694**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition
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 NAME
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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:

Rev. Elliott P. Barrington, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-29-01

CR2E037 (10/00)