2003 NOT-FOR-PROFIT CORPORATION

UI	NIFORM BUSINE	SS REPORT	(UBR)		1 03, 2003 8:0		
DOCUMENT # 734992 1. Entity Name JEREMIAH CHURCH FOR ALL PEOPLES, INC.				Secretary of State 06-03-2003 90038 047 ****70.00			
Principal Place 1903 NE 114TI WALDO FL 32		Mailing Address 19303 NE 114TH AVE WALDO FL 32694				SIAN ELAN LEEL	
2 Principal Place of Bysine is K 114 Are 3. Mailing Address							
		Suite, Apt. #, etc.	Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES		
City & State Ci		City & State	City & State		4. FEI Number 05-0065400 Applied For Not Applicable		
326	9-4- Maurcha	Zip	Country	5. Certificate of Str	atus Desired		
	6. Name and Address of Current F	Registered Agent		7. Name and Add	ress of New Registered Agent		
Name Name							
Barrington, Elliott Preston Jr. Star Route 1, Box 858			Street Address	Street Address (P.O. Box Number is Not Acceptable)			
WALDO FL 32694			-	·			
\$ 			City		FL Zip C		
	e named entity submits this statement for tions of registered agent.	the purpose of changing its re	egistered office or regist	ered agent, or both, in	the State of Florida. I am familiar wi	h, and accept	
SIGNATURE Revisited New York Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) DATE							
FILE NOW: FEE IS \$61.25 9. Election Campai Trust Fund Contr			\$5.00 May Be Added to Fees	Make Check Payab Florida Department o			
19(OFFICERS AND DIR		11.	ADDITIONS/CHANGI	ES TO OFFICERS AND DIRECTORS		
TITLE NAIXE STREET ADDRESS CITY-ST-ZIP	PD BARRINGTON,ELLIOTT P. JR STAR ROUTE 1, BOX 858 WALDO FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Chang	e 🗋 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BARRINGTON E P III STAR ROUTE 1, BOX 858 WALDO FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Chang	e Addition	
						1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BARRINGTON,DOLLIE ANN STAR ROUTE 1, BOX 858 WALDO FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Chang	e Addition	
NAME STREET ADDRESS	BARRINGTON, DOLLIE ANN STAR ROUTE 1, BOX 858	☐ Delete	NAME STREET ADDRESS		☐ Chang		
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	BARRINGTON, DOLLIE ANN STAR ROUTE 1, BOX 858 WALDO FL AS BARRINGTON, ELIZABETH A STAR RT. 1, BOX 858		NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			e 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 Elock 11 if changed, or on an attachment with an address, with all other like empowered.

6-2-03