

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2003 8:00 am
Secretary of State

02-04-2003 90117 020 ****61.25

DOCUMENT # 735241

1. Entity Name

APOSTOLIC TABERNACLE CHURCH OF TITUSVILLE, FLORIDA, INC.



Principal Place of Business

**616 OLIVE ST.
TITUSVILLE FL 32796-7649**

Mailing Address

**616 OLIVE ST.
TITUSVILLE FL 32796-7649**

22002031



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2386977**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CAMPBELL, ALBERTA
616 OLIVE ST.
TITUSVILLE FL 32780**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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 Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	CD	☐ Delete
NAME	CAMPBELL, ALBERTA	
STREET ADDRESS	616 OLIVE STREET	
CITY-ST-ZIP	TITUSVILLE FL	
TITLE	D	☐ Delete
NAME	MOORE, JESSIE L	
STREET ADDRESS	3585 RIDGEWAY AVE,	
CITY-ST-ZIP	MIMS FL	
TITLE	VCD	☐ Delete
NAME	MUSGROVE, RICHARD	
STREET ADDRESS	6905 KNIGHTSWOOD DR	
CITY-ST-ZIP	ORLANDO FL	
TITLE	D	☐ Delete
NAME	MUSGROVE, EUZERA L.	
STREET ADDRESS	6905 KNIGHTSWOOD DR.	
CITY-ST-ZIP	ORLANDO FL	
TITLE	M	☐ Delete
NAME	ANDERSON, EARLIENE	
STREET ADDRESS	5008 ANZIO ST	
CITY-ST-ZIP	ORLANDO FL 32819	
TITLE	D	☒ Delete
NAME	CAMPBELL, ANN	
STREET ADDRESS	850 BON AIR ST	
CITY-ST-ZIP	TITUSVILLE FL	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DEACON	☐ Change ☒ Addition
NAME	JAMES E ADDY	
STREET ADDRESS	1435 Kings Ct	
CITY-ST-ZIP	Titusville, FL 32780	

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:

Alberta Campbell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**1/30/03 (321)
267-1428**

CR2E037 (10/02)