

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 738002

1. Entity Name

NEW LIFE ASSEMBLY OF GOD, INC., OF CLEARWATER, F
LORIDA

Principal Place of Business

5656 150TH AVENUE NORTH
CLEARWATER FL 33760

Mailing Address

5656 150TH AVENUE NORTH
CLEARWATER FL 33760

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1874901

Applied For

Not Applicable

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

GRIFFIN, RON
7200 13TH AVE., N.
ST. PETERSBURG FL 33710

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

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME GRIFFIN, RONALD
STREET ADDRESS 7200 13TH AVE. N.
CITY-ST-ZIP ST. PETERSBURG FL 33710 ☐ Delete

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

TITLE TD
NAME WILSON, SHARON
STREET ADDRESS 5857 157TH AVENUE NORTH
CITY-ST-ZIP CLEARWATER FL 33760 ☐ Delete

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

TITLE SD
NAME LYNN, ERIC E
STREET ADDRESS 15777 BELESTA RD LOT 2
CITY-ST-ZIP CLEARWATER FL 33760 ☐ Delete

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

TITLE D
NAME LAPIERE, WILLIAM
STREET ADDRESS 7001 142TH AVE. N.
CITY-ST-ZIP CLEARWATER FL 33771 ☐ Delete

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

TITLE D
NAME LEBELL, YVON
STREET ADDRESS 512 7TH AVE N.E.
CITY-ST-ZIP LARGO FL 33770 ☐ Delete

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

TITLE D
NAME PARSONS, PAUL
STREET ADDRESS 1873 BALBOA
CITY-ST-ZIP CLEARWATER FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90134 004 ***61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)