

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 748253

1. Entity Name

ALL POWER CHURCH OF OUR LORD JESUS CHRIST INC.

FILED

03 JUN -9 AM 8:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

4TH ST 316  
HOMESTEAD FL 33033  
US

Mailing Address

30113 S.W. 152ND PLACE  
LEISURE CITY FL 33033  
US

2. Principal Place of Business

4TH ST 316  
Suite, Apt. #, etc.

3. Mailing Address

30113 S.W. 152ND  
Suite, Apt. #, etc.

City & State

HOMESTEAD FL

City & State

LEISURE CITY FL

4. FEI Number

65-0323965

Applied For

Not Applicable

Zip

33033

Country

DADE

Zip

33033

Country

DADE

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MCKAY, SAMANTHA  
30113 S.W. 152ND AVE  
LEISURE CITY FL 33033

7. Name and Address of New Registered Agent

Name MCKAY, SAMANTHA

Street Address (P.O. Box Number is Not Acceptable)

30113 SW 152 AVE

City LEISURE CITY

FL

Zip Code

33033

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.

800020687268  
06/09/03--01083--002 \*\*61.25

SIGNATURE

*Samantha McKay*

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

TITLE PFD  
NAME MCKAY, ROBERT E  
STREET ADDRESS 30113 SW 152ND AVE  
CITY-ST-ZIP LEISURE CITY FL 33033 ☒ Delete

TITLE TD  
NAME MCKAY, YVONNE  
STREET ADDRESS 30113 SW 152ND AVE  
CITY-ST-ZIP LEISURE CITY FL 33033 ☒ Delete

TITLE SD  
NAME MCKAY, SAMANTHA  
STREET ADDRESS 30113 SW 152 AVE  
CITY-ST-ZIP LEISURE CITY FL 33033 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PFD  
NAME MCKAY, ROBERT E  
STREET ADDRESS 30113 SW 152ND AVE  
CITY-ST-ZIP LEISURE CITY FL 33033 ☒ Change ☐ Addition

TITLE TD  
NAME MCKAY, YVONNE  
STREET ADDRESS 30113 SW 152ND AVE  
CITY-ST-ZIP LEISURE CITY FL 33033 ☒ Change ☐ Addition

TITLE SD  
NAME MCKAY, SAMANTHA  
STREET ADDRESS 30113 SW 152 AVE  
CITY-ST-ZIP LEISURE CITY FL 33033 ☒ Change ☐ Addition

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

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

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Bishop Robert McKay*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2003

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