2002 UNIFORM BUSINESS REPORT (UBR)

Mar 06, 2002 8:00 am 5 Secretary of State **DOCUMENT # 749282** 1. Entity Name CALVARY TABERNACLE UNITED PENTECOSTAL CHURCH, IN 03-06-2002 90103 044 ****61.25 Principal Place of Business Mailing Address 10930 US HWY 301 N. 10930 US HWY 301 N. THONOTOSASSA FL 33592 THONOTOSASSA FL 33592 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-2040610 Not Applicable Zip \$8.75 Additional Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable). — WOLFE, ELIZABETH A **6916 GREENHILL PLACE TAMPA FL 33616** City 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. Leth a. Wolfe 2-2 ame of registered agent and title if applicable. UNOTE: Registered Agent signature required when reinstating) DAT Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TD ☐ Change Addition Delete TITLE TITLE BRIMMAGE, CARLTON D NAME NAME STREET ADDRESS 17316 HANNA ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LUTZ FL ☐ Change Addition ☐ Delete TITLE TITLE LAWRENCE, CARLOS NAME STREET ADDRESS 7716 SUMTER CT. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL STD ☐ Change Addition ☐ Delete TITLE WOLFE, EUZABETH A NAME 7 NAME: 10930 US HWY 301 N STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THONOTOSASSA FL 33592 PCD Change Addition ☐ Delete TITLE TITLE WOLFE, JAMES A NAME NAME STREET ADDRESS STREET ADDRESS 6916 GREENHILL PLACE CITY-ST-ZIP CITY-ST-ZIP TEMPLE TERRACE FL ☐ Change Addition TITLE Delete TITLE SIMPSON, ROGER JR NAME NAME STREET ADDRESS STREET ADDRESS 3622 E 38TH AVENUE CITY-ST-ZIP CITY-ST-ZIP Tampa Fl Addition ☐ Change TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

KELEQU

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED