

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90033 030 ****61.25

DOCUMENT # 751743

1. Entity Name

KAINOS INTERNATIONAL CHURCH OF FLORIDA, INC.

Principal Place of Business

**205 JOHNSON STREET
 PLANT CITY FL 33566
 US**

Mailing Address

**PO BOX 804
 PLANT CITY FL 33564-0804**

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

38-3380859

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

FLUELLEN, CURTIS JR

**509 WEST BALL STREET
 APARTMENT 4- 201
 PLANT CITY FL 33566**

912 Loganderry Lane

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 **TD** ☐ Delete
 NAME **LOVE, PARTICIA**
 STREET ADDRESS **1301 EAST OHIO STREET**
 CITY-ST-ZIP **PLANT CITY FL**

TITLE **D** ☐ Change ☒ Addition
 NAME **Vinson Richardson**
 STREET ADDRESS **1301 W. Bates Street**
 CITY-ST-ZIP **Plant City FL 33566**

TITLE **PD** ☐ Delete
 NAME **BURNETT, LORRAINE**
 STREET ADDRESS **1301 W. BATES STREET**
 CITY-ST-ZIP **PLANT CITY FL**

TITLE **D** ☐ Change ☒ Addition
 NAME **Roderick Williams**
 STREET ADDRESS **361 Market Square East**
 CITY-ST-ZIP **Lakeland - FL 33813**

TITLE **V** ☐ Delete
 NAME **RHODEN, BELINDA**
 STREET ADDRESS **3013 OAKVIEW LANE**
 CITY-ST-ZIP **PLANT CITY FL**

TITLE **D** ☐ Change ☒ Addition
 NAME **Curtis Fluellen, Jr.**
 STREET ADDRESS **912 Loganberry Lane Apt #**
 CITY-ST-ZIP **Plant City FL 33566**

TITLE **D** ☒ Delete
 NAME **MORTON, DAVID**
 STREET ADDRESS **108 WEST BALL STREET APT#5**
 CITY-ST-ZIP **PLANT CITY FL 33566**

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

TITLE **S** ☐ Delete
 NAME **WILLIAMS, SHERRY**
 STREET ADDRESS **361 MARKET SQUARE EAST**
 CITY-ST-ZIP **LAKELAND FL 33813**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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.

SIGNATURE:

Lorraine Burnett **2/25/02 (813) 764-0929**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)