FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 02, 2001 8:00 am Secretary of State D@CUMENT # 753577 1. Entity Name 04-02-2001 90360 018 ****70.00 GOSPEL TEMPLE OF PENSACOLA, FLORIDA, INC. Principal Place of Business Mailing Address 3626 NORTH Q STREET 3626 NORTH Q STREET 100019 PENSACOLA FL 32505 PENSACOLA FL 32505 2. Principal Place of Business 3. Mailing Address Gospel Paspla Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2502588 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired ∇ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) SMITH, WILLIE MAE 2220 W. HERMAN AVE PENSACOLA FL 32505 Zip Code FL 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 DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: \$5.00 May Be Make Check Payable to Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PTR ☐ Delete TITLE TITLE ☐ Change **≨** Addition ΤR NAME SMITH, WILLIE MAE NAME Redmond, Raymond 2220 W HERMAN AVE STREET ADDRESS STREET ADDRESS 99 Juniper St. CITY-ST-ZIP PENSACOLA FL CITY-ST-ZIP Walnut Hill, Florida TITLE ☐ Delete TITLE ☐ Addition ☐ Change REIDS, DAFNIE NAME NAME STREET ADDRESS 7430 COBB LANE STREET ADDRESS CITY-ST-ZIP PENSACOLA FL CITY-ST-ZIP TIT! F ☐ Delete TITLE ☐ Change ☐ Addition RHODES, DELOIS NAME NAME STREET ADDRESS 6207 CHICAGO AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL TITLE TR ☐ Delete TITLE ☐ Change ☐ Addition SHOWERS, LEANDER NAME NAME STREET ADDRESS 46 N CYPRESS ST STREET ADDRESS CITY-ST-ZIP WALNUT HILL FL CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition WILEY, ELOUISE R NAME NAME STREET ADDRESS 6840 FIELDS LANE STREET ADDRESS CITY-ST-ZIP PENSACOLA FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition SIMMONS, BRENDA NAME NAME STREET ADDRESS 1800 WEST GADSDEN ST. STREET ADDRESS CITY-ST-ZIP PENSACOLA FL 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 attachmer

SIGNATURE: