

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 754954

1. Entity Name

BIBLE HOLINESS CHURCH OF GOD IN CHRIST, INC.

**FILED**  
Feb 26, 2002 8:00 am  
Secretary of State

02-26-2002 90153 025 \*\*\*\*70.00

Principal Place of Business

Mailing Address

419 5TH ST SO.  
ST. PETERSBURG FL 33701

419 5TH ST SO.  
ST. PETERSBURG FL 33701

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

59-2131695

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

WALKER, B. O.  
535 62ND AVENUE SOUTH  
SAINT PETERSBURG FL 33705

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 D  
NAME JONES, MRS WILLIE P  
STREET ADDRESS 1721 17 STREET SO  
CITY-ST-ZIP ST PETERSBURG, FL 00000 ☐ Delete

TITLE D  
NAME JONES, MRS. WILLIE P. ☒ Change ☐ Addition  
STREET ADDRESS 1721 17TH STREET SO.  
CITY-ST-ZIP ST. PETERSBURG, FL. 33712

TITLE S  
NAME OLIVER, CHERYL ☒ Delete  
STREET ADDRESS 4500 25TH AVE SOUTH  
CITY-ST-ZIP ST. PETERSBURG FL

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

TITLE PD  
NAME WALKER, B O  
STREET ADDRESS 3700 9TH AVE N.  
CITY-ST-ZIP ST PETERSBURG, FL 00000 ☐ Delete

TITLE P.D.  
NAME WALKER B.O. (REV) ☒ Change ☐ Addition  
STREET ADDRESS 535 62ND AVE. SO.  
CITY-ST-ZIP ST. PETERSBURG, FL. 33705

TITLE TD  
NAME WELLS, JOHN  
STREET ADDRESS 2511 COLUMBUS WAY SOUTH  
CITY-ST-ZIP ST. PETERSBURG FL ☐ Delete

TITLE TD  
NAME WELLS, JOHN ☒ Change ☐ Addition  
STREET ADDRESS 2511 COLUMBUS WAY SO  
CITY-ST-ZIP ST. PETERSBURG, FL 33712

TITLE D  
NAME BOYKINS, BENJAMIN  
STREET ADDRESS 2221 14TH AVE SOUTH  
CITY-ST-ZIP ST. PETERSBURG FL ☐ Delete

TITLE D.  
NAME BOYKINS, BENJAMIN ☒ Change ☐ Addition  
STREET ADDRESS 2221 14TH AVE. SO.  
CITY-ST-ZIP ST. PETERSBURG, FL. 33712

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ 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:

BENJAMIN BOYKINS, PASTOR

FEB. 10, 2002

CR2E037 (9/01)