

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 756772

FILED
Feb 26, 2003
Secretary of State

Entity Name: FAITH APOSTOLIC CHURCH INC. OF NAPLES, FLORIDA

Current Principal Place of Business:

% LARRY G SIMS
3196 COUNTY BARN ROAD
NAPLES, FL 33962

New Principal Place of Business:

% LARRY G SIMS
3196 COUNTY BARN ROAD
NAPLES, FL 34112

Current Mailing Address:

% LARRY G SIMS
3196 COUNTY BARN ROAD
NAPLES, FL 33962

New Mailing Address:

% LARRY G SIMS
3196 COUNTY BARN ROAD
NAPLES, FL 34112

FEI Number: 59-1754556

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SIMS, LARRY G
3916 COUNTY BARN ROAD
NAPLES, FL 33962

Name and Address of New Registered Agent:

SIMS, LARRY G
3916 COUNTY BARN ROAD
NAPLES, FL 34112

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:

02/26/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: HAMEL, PHILLIP P.T.
Address: 4779 32ND AVENUE SW
City-St-Zip: NAPLES, FL 34116

Title: PD () Delete
Name: SIMS, LARRY G,
Address: 3196 COUNTY BARN RD
City-St-Zip: NAPLES, FL

Title: ST () Delete
Name: CONYER, ELIZABETH
Address: 3650 1ST AVE SW
City-St-Zip: NAPLES, FL 34117

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: SIMS, LARRY G,
Address: 3196 COUNTY BARN RD
City-St-Zip: NAPLES, FL 34112

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY G. SIMS

PD

02/26/2003

Electronic Signature of Signing Officer or Director

Date