2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 757725

1. Entity Name

ALLEN CHAPEL AFRICAN METHODIST EPISCOPAL CHURCH



FILED ECRETARY OF STATE

00 OCT -9 AM 9: 07 Mailing Address Principal Place of Business 580 GEORGE W ENGRAM BLVD POST OFFICE BOX 9573 DAYTONA BEACH FL 32120-9573 DAYTONA BEACH FL 32114 us 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2138621 Not Applicable \$8.75 Additional Country Zip Country Zip 5. Certificate of Status Desired Σx 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) FORRESTER, J R 139 SO KEECH STREET DAYTONA BEACH FL 32114 Zin Coge 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. 2007 BAR (300) 1932 Linder of the SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. (66/6) ☐ Addition ☐ Channe TITLE □ Delete TITLE NAME DESMORE, REVA NAME **CR2E037** STREET ADDRESS 851 MADISON STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DAYTONA BCH FI ☐ Addition TITLE ☐ Change Deleta TITLE MAME GRIMES, DAISY NAME STREET ADDRESS STREET ADDRESS 130 OLD MILL RUN CDY-57-719 CITY-ST-ZIP ORMOND BCH FL 32174 Change - Addition TITLE Delete NAME BOUIE, MICHAEL K STREET ADDRESS STREET ADDRESS 320 N UNCOLN ST CITY-ST-7/P CITY-ST-ZIP DAYTONA BCH FL ☐ Change X Addition TITLE TITLE XXOeleta NAME ST. JAMES, LUTHER III NAME Hamilton, Linwood STREET ADDRESS 4 FOX HOLLOW DRIVE STREET ADDRESS 1436 Peachtree Road CITY-ST-ZIP CITY-ST-ZIP **ORMOND BEACH FL 32174** Daytona Beach, FL 32114 ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME DAVIS, EVANGELYN NAME STREET ADDRESS STREET ADDRESS 872 HOLLYWOOD ST. CITY-ST-7IP CITY-ST-ZIP DAYTONA BEACH FL 32114 Change ☐ Addition TIDE ☐ Delete TITLE HENDERSON, ROBERT NAME NAME AN STREET ADDRESS STREET ADDRESS 1492 SURVEY PARK DRIVE CITY-ST-ZIP CITY-SY-ZIP PORT ORANGE FL 32124

12. I hereby certify that the information supplied with this filling 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

01/19/00