

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 28, 2003 8:00 am**  
**Secretary of State**

04-28-2003 91516 019 \*\*\*\*61.25

DOCUMENT # 760851

1. Entity Name

Eastside Assembly of God  
Church, Inc



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

3610 E. 14TH ST.

Suite, Apt. #, etc.

PANAMA CITY, FL

City & State

32 PANAMA CITY, FL

Zip

32404

Country

USA

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

DO NOT WRITE IN THIS SPACE

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

ALICE TAYLOR

Street Address (P.O. Box Number is Not Acceptable)

1509 WYOMING AVE

City

LYNN HAVEN

FL

Zip Code  
32444

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Alice Taylor Alice Taylor

ST

042403

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$61.25

Initial or Amended UBR

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	G SPENCE, SAM 2224 E BALDWIN RD PANAMA CITY, FL 3
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD SPENCE, THOMAS 2921 AVON RD PANAMA CITY, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD GOODWIN, RICHARD JR 6020 E. WHY 22 PANAMA CITY, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD MOON, JAMES 931 S KATHERINE AVE PANAMA CITY, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TR MILLS, JAMES P 1207 FRANKFORD AVE. PANAMA CITY, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST TAYLOR, ALICE 1509 WYOMING AVE LYNN HAVEN, FL

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**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Alice Taylor Alice Taylor

042403

850 265-4148

CR2E037B (12/02)