

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 770787

1. Entity Name

FRIDAY ROAD WORSHIP CENTER, INC.

Principal Place of Business

1855 N FRIDAY ROAD  
COCOA FL 32926  
US

Mailing Address

1855 N. FRIDAY ROAD  
COCOA FL 32926  
US

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

59-2874667

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ROGGENKAMP, LINDA  
2582 STRADFORD DR  
COCOA FL 32926

7. Name and Address of New Registered Agent

Name

MARILYN MINNEBOO

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

4135 JAMES RD

City

COCOA

FL

Zip Code

32926

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 BOARD SECRETARY MARILYN MINNEBOO

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

(NOTE: Registered Agent signature required when reinstating)

01-10-2002

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

TITLE PC  
NAME PERKINS, DICK  
STREET ADDRESS 1855 FRIDAY RD  
CITY-ST-ZIP COCOA FL ☐ Delete

TITLE T  
NAME ROGGEN, KAMP LINDA  
STREET ADDRESS 2582 STRADFORD DR.  
CITY-ST-ZIP COCOA FL ☒ Delete

TITLE T  
NAME NORTON, JUDY  
STREET ADDRESS 4689 S. FRIDAY CIR  
CITY-ST-ZIP COCOA FL ☐ Delete

TITLE T  
NAME PERKINS, ANITA  
STREET ADDRESS 1855 FRIDAY RD  
CITY-ST-ZIP COCOA FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE BOARD SECRETARY  
NAME MARILYN MINNEBOO  
STREET ADDRESS 4135 JAMES RD  
CITY-ST-ZIP COCOA FL 32926 ☐ Change ☒ Addition

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

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

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

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:

Signature of Registered Agent

01-10-2002 3216384900

CR2E037 (9/01)