

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90273 007 ****61.25

DOCUMENT # 771048

1. Entity Name

UNITED ASSEMBLY CHURCH, INC.



Principal Place of Business

4908 MLK JR BLVD
PLANT CITY FL 33567

Mailing Address

4908 MLK JR BLVD
PLANT CITY FL 33567

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

PLANT CITY

City & State

FLA

Zip

Country

HILLSBORO

Zip

33567

Country

4. FEI Number

59-2440376

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BUZBEE, JAMES H
114 S COLLINS
PLANT CITY FL 33566

7. Name and Address of New Registered Agent

Name

N/A

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

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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 PD ☐ Delete
NAME GRUBBS, JAMES
STREET ADDRESS 4906 MLK JR BLVD E
CITY-ST-ZIP PLANT CITY FL 33567

TITLE VST ☐ Delete
NAME GRUBBS, CHERRY
STREET ADDRESS 4906 MLK JR BLVD E
CITY-ST-ZIP PLANT CITY FL 33567

TITLE D ☐ Delete
NAME GRUBBS, CHERRY
STREET ADDRESS 4906 MLK JR BLVD E
CITY-ST-ZIP PLANT CITY FL 33567

TITLE D ☐ Delete
NAME OVERMILLER, TERRI L
STREET ADDRESS 3023 KEUKA LOOP
CITY-ST-ZIP LAKELAND FL 33810

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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CITY-ST-ZIP

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Cherry M. Grubbs Cherry M Grubbs 3/14/06 813-754-2523