

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 771160

1. Entity Name

ALL NATIONS CHURCH OF GOD BY FAITH, INC. ✓

FILED
Jul 24, 2000 8:00 am
Secretary of State

07-24-2000 90014 003 ****61.25

Principal Place of Business

3000 4TH AVE S
 ST. PETERSBURG FL 33712
 US

Mailing Address

3850 9TH AVE. SO.
 ST. PETERSBURG FL 33711-2109
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2433685

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, JAMES E.
 3850 NINTH AVENUE SOUTH
 ST. PETERSBURG FL 33711

7. Name and Address of New Registered Agent

Name

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.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

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

T MINSY, JEREMIAH Delete
 STREET ADDRESS 810 38 AVE SO
 CITY-ST-ZIP ST. PETERSBURG FL

P ~~WILLIAMS, JOHNNIE L (PASTR)~~ Delete
 STREET ADDRESS ~~3850 NINTH AVENUE SOUTH~~
 CITY-ST-ZIP ~~ST. PETERSBURG FL~~

VD WILLIAMS, JAMES E. Delete
 STREET ADDRESS 3850 NINTH AVENUE SOUTH
 CITY-ST-ZIP ST. PETERSBURG FL

SD BRADLEY, DOROTHY Delete
 STREET ADDRESS 2005 28TH STREET SOUTH
 CITY-ST-ZIP ST. PETERSBURG FL

TD DAVIS, B. G. Delete
 STREET ADDRESS 1835 27TH STREET SOUTH
 CITY-ST-ZIP ST. PETERSBURG FL

CD WELLS, WAYNE Delete
 STREET ADDRESS 1600 FAIRWAY AVE SO
 CITY-ST-ZIP ST. PETERSBURG FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME Change Addition
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE NAME Change Addition
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 CITY-ST-ZIP

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 Johnnie Lee Williams Johnnie Lee Williams 7/19/00 7273272651
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)