2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State
05-02-2003 90098 033 ****70.00

DOCUMENT # 807580

1. Entity Name

SUPREME COUNCIL OF THE HOUSE OF JACOB OF THE UNI TED STATES OF AMERICA

Principal Place of Business	Mailing Address
POST OFFICE BOX 310 COSHOCTON OH 43812 US	POST OFFICE BOX 310 COSHOCTON OH 43812 US

☐ CHECK HERE IF MAKING CHANGES

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 31-6401813 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TYSON, GLEN SR. 5504 86TH ST. TAMPA FL 33619	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST FONTAINE, A R ROUTE 1 COSHOCTON OH	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 25645 TR 36 Coshocton OH 43812
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ACD PEARSON, BISHOP J PO BOX 300 N/A COSHOCTON OH 43812	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 3614 Stonegleh South Richmond, CA 94806
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD COLLINS, J D ROUTE 1 COSHOCTON OH	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 25645 TR 36 Coshocton OH 43812
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD GRIMES, CAROLYN L ROUTE 1 COSHOCTON OH	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 45261 TR 28 Coshocton OH 43812
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COLLINS, BERTILLA ROUTE 1 COSHOCTON OH	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 25645 TR 36 Coshocton OH 43812
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

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 REQUIRED 4/28/03 (740) 824-3737