

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 820222

1. Entity Name

CHURCH EXTENSION OF THE CHURCH OF GOD, INC.

Principal Place of Business

1812 UNIVERSITY BLVD  
ANDERSON IN 46012

Mailing Address

P. O. BOX 2069  
ANDERSON IN 46018-2069

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

BOEDEKER, JOHN  
211 PRESIDENTS DR  
LAKE WALES FL 33859

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CURRY, MICHAEL D REV 1721 LELAND AVENUE EVANSTON IL 60201	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVEY, FREDERICK J REV 8119 WIND FOREST DRIVE HOUSTON TX 77040	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KRUSHEL, REV. B G. 5807 35TH AVE. CAMROSE AL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C PRUITT, EARL 219 6TH ST FINDLAY OH	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEREZ-SCRIVNER, REV. C 29629 EAST WOODARD RD. TROUTDALE OR	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHOCKEY, REV. R W. 9633 LINCOL BLVD INDIANAPOLIS IN	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: DAVID A. TSE  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED  
Mar 15, 2000 8:00 am  
Secretary of State

03-15-2000 90072 041 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number 35-0869027  
Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

CR2E037 (9/99)

3/7/00

765/644-2555

Date

Daytime Phone #

921460

一、二、三、四、五、六、七、八、九、十、十一、十二、十三、十四、十五、十六、十七、十八、十九、二十、二十一、二十二、二十三、二十四、二十五、二十六、二十七、二十八、二十九、三十、三十一、三十二、三十三、三十四、三十五、三十六、三十七、三十八、三十九、四十、四十一、四十二、四十三、四十四、四十五、四十六、四十七、四十八、四十九、五十、五十一、五十二、五十三、五十四、五十五、五十六、五十七、五十八、五十九、六十、六十一、六十二、六十三、六十四、六十五、六十六、六十七、六十八、六十九、七十、七十一、七十二、七十三、七十四、七十五、七十六、七十七、七十八、七十九、八十、八十一、八十二、八十三、八十四、八十五、八十六、八十七、八十八、八十九、九十、九十一、九十二、九十三、九十四、九十五、九十六、九十七、九十八、九十九、一百。

**FAITH E. PHILE**  
**Notary Public, State of Indiana**  
**Madison County**  
**My Commission Exp. Oct. 6, 2001**

820222

## CERTIFICATION

921460

**Church Extension of the Church of God, Inc.  
Administrative Officers**

I HEREBY CERTIFY that I am the duly elected Secretary of Church Extension of the Church of God, Inc., a not-for-profit corporation organized and existing under the laws of the State of Indiana; that as such Secretary, I have custody of the records of said corporation and particularly the record of the minutes of the meetings of said corporation's Board of Directors; that at a certain meeting said Board of Directors held on the 13<sup>th</sup> day of January, 2000, of which meeting all of the Directors of said corporation were duly notified in accordance with the Bylaws of said corporation, and at which meeting a quorum of such Directors passed the following resolution, and is not in conflict with any of the Bylaws of said corporation:

RESOLVED, that as of this 13<sup>th</sup> day of January, 2000, the Administrative Officers of Church Extension of the Church of God, Inc. are:

J. Perry Grubbs, President  
Cecil W. Watson, Executive Vice-President  
L. Kent Adcock, Vice-President & Assistant Treasurer  
Larry E. Sloan, Treasurer/CFO  
David H. Fortune, Secretary & Senior Assistant Treasurer

I FURTHER CERTIFY that the above action has not been modified or repealed and is still in full force and effect.

IN WITNESS WHEREOF, I have hereunto affixed my name as Secretary and have caused the corporate seal of said corporation to be hereto affixed this 6<sup>th</sup> day of March, 2000.

CHURCH EXTENSION  
OF THE CHURCH OF GOD, INC.

By: David H. Fortune  
David H. Fortune, Secretary

STATE OF INDIANA     )  
                                  ) ss  
COUNTY OF MADISON )

SWORN AND SUBSCRIBED before me, the undersigned notary public, by David H. Fortune, to me known to be the Secretary of Church Extension of the Church of God, Inc., an Indiana not-for-profit corporation, this 6<sup>th</sup> day of March, 2000, at Anderson, Madison County, Indiana.

Faith E. Phile  
Notary Public

My Commission Expires:

**FAITH E. PHILE**  
Notary Public, State of Indiana  
Madison County  
My Commission Exp. Oct. 6, 2001