2000 UNIFORM BUSINESS REPORT (UBB) **DOCUMENT # 837697** Jun 12, 2000 8:00 am Secretary of State REGGIE KILLOUGH'S CHRIST TEAM, INC. 06-12-2000 90032 019 ****61.25 Principal Place of Business Mailing Address 1256 BTH ST P O BOX 265010 DAYTONA BEHAC FL 32114 DAYTONA BEHAC FL 32126-5010 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For **5-**0990367 Beach Not Applicable)auton Country \$8.75 Additional 5. Certificate of Status Desired lolusia Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) KILLOUGH, REGGIE 680 OCEAN SHORE BLVD ORMOND BEACH FL 32176 Zip Code 8. The above named entry submite this statement for the purpose of manging its registered office or registered agent, or both, in the state of Florida. SIGNATURE Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. **Department of State FEE IS \$61.25** Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Addition ☐ Delete TITLE TITLE KILLOUGH, REGGIE NAME NAME STREET ADDRESS 680 OCEAN SHORE BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORMOND BEACH FL 32176 STD Delete ☐ Change ☐ Addition TITLE TITLE RANEW, DAVID NAME STREET ADDRESS STREET ADDRESS 320 JEFFERSON ST. CITY-ST-ZIP CITY-ST-ZIP PORT ORANGE FL ☐ Addition ☐ Change ☐ Delete TITLE KILLOUGH, SHIRLEY NAME NAME STREET ADDRESS 680 OCEAN SHORE BLV D STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORMOND BEACH FL 32176 Change ☐ Addition ☐ Delete BOOTH, DENNIS STREET ADDRESS **63 MAIN STREET** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FARMINGDALE NJ Addition □ Delete TITLE Change HECK, COLETTE STREET ADDRESS STREET ADDRESS 1141 S. RIDGEWOOD AVE. CITY-ST-ZIP CITY-ST-ZIP DAYTONA FL 32114 Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 supplier ental report is true and according 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 at trustee exprowered to receive 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 w JIREREV. Reggic Killough 5-1.00 904-441-6018

FFICER OR DIRECTOR Description Date

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SIGNATURE: