2002 UNIFORM BUSINESS REPORT (UBR) FILED May 06, 2002 8:00 am Secretary of State DOCUMENT # F00000002096 1. Entity Name PENTECOSTAL EPISTLE OF CHRIST HOLINESS CHURCH, I 05-06-2002 90095 019 ****70 00 Principal Place of Business Mailing Address 1270 NW 62ND ST P.O. BOX 471264 MIAMI FI 33147 MIAMI FL 33247 2. Principal Place of Business 11264 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 5 FEI Number ity & State City & State Applied For NOT APPLICABLE Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 60 doN GOLDEN, NORRIS: L 1852 NW 51ST TERR MIAMI FL 33142 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, wooth, in the state of Florida. Golden 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. (9/01 CP Change ☐ Addition TITLE ☐ Delete TITLE Golden, Norris NAME GOLDEN, NORRIS L NAME 3221NW17845+. STREET ADDRESS STREET ADDRESS 1852 NW 51ST TERR arol City CITY-ST-ZIP **MIAMI FL 33142** CITY-ST-ZIP + secrel ☐ Delete **A** etiange ☐ Addition TITLE TITLE GOLDEN, MARY J NAME NAME Golden, MAR 3221 NW 178 STREET ADDRESS **1852 NW 51ST TERR** STREET ADDRESS CITY-ST-ZIP MIAMI FL 33142 CITY-ST-ZIP Arol City , FL ☐ Delete D TITLE Change TITLE ☐ Addition Reed, Frederick D REED. FREDERICK D NAME NAME STREET ADDRESS STREET ADDRESS 1852.NW.51ST-TERR== CITY-ST-ZIF MIAM! FL 33142 CITY-ST-ZIP 33056 Change TITLE TITLE Delete ☐ Addition DONZELL, WILLIAMS NAME NAME STREET ADDRESS STREET ADDRESS 2000 NW 68TH ST. BLDG 2 APT 105 CITY-ST-ZIF CITY-ST-ZIP MIAMI FL 33147 Delete Change ☐ Addition TITLE WILLIAMS, LORIE NEWMAN NAME NAME 2000 NW 68TH ST, BLDG 2 APT 105 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP **MIAMI FL 33138** TITLE ☐ Delete TITLE Change Addition CAMILLE, JENNIFER D NAME NAME STREET ADDRESS 15 NW 70TH ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33150** 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.