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

## DOCUMENT # **F95000000689**

1. Entity Name

THE ASSOCIATION OF MESSIANIC BELIEVERS, INC.



## FILED Mar 21, 2003 8:00 am § Secretary of State

03-21-2003 90128 049 \*\*\*\*61.25

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3190 GULF-TO-BAY BLVD 3190				Mailing Address 190 GULF-TO-BAY BLVD LEARWATER FL 33759-4505						<b></b>	1 <b>4 8</b> 24 <b>8 8</b> 44 <b>8</b> 4 11	NICE LEGI LAND	
2. Principal F	Place of Busine	ess	Mailing Address										
Sulte, Apt. #, etc.				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES					
City & State				City & State			+	4. FEI Number 76-0378958				Applied For Not Applicable	
Zip	Country			ip	Cou	ntry	5. Certificate of Status Desired				\$9.75 Additional		
6. Name and Address of Current Register				ed Agent			<del></del>	7. Name and Address of New Registered Agent					
			Name										
FISCHER, JOHN DR 3190 GULF-TO-BAY BLVD CLEARWATER FL 34619				the second of the second		Street Address (P.O. Box Number is Not Acceptable)							
CLEARW	AIEN FL 94	019				City				FL	Zip Cod	e	$\frac{1}{1}$
9. The chave	, named antitud	aubmita this statement fo		ann of changing its		al affice or real	:	annat ar bath in	the Ctate of Flag		مافنىد مىنانام		-
the obligat	named entity tions of registe	submits this statement fo ged agent.	r tne purp	oose of changing its	registere	ed office or regis	isterea	agent, or both, in	ine State of Flor	ida. Tam ia	ımıllar with,	and accept	
		3											Į
SIGNATURE .													İ
SIGNATURE .	Signature, typed o	ruprinted name of registered agent	and title if ap	plicable. (NOTE	Registered	Agent signature requ	quired who	en reinstating)		DATE			1
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FILE NOW: FEE IS \$61.25				9. Election Campaign Financing  Trust Fund Contribution.			<b>\$</b> .	<b>5.00</b> May Be dded to Fees		te Check a Departi			
10. OFFICERS AND DIRECTORS				11.			ΔΩ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE	PD OFFICERS AND DIRECTORS			Delete	TITLE		٨٥	DITIONS/CITAING	_3 10 OF TICE!		☐ Change	☐ Addition	2
NAMÉ .	FISCHER,	IOHN DR		L) Delete	NAME						□ Ollarige	Addition	10/02
STREET ADDRESS 3190 GULF-TO-BAY BOULEVARD						ET ADDRESS							1
CITY-ST-ZIP CLEARWATER FL 33759-4505				CITY		ST-ZIP '							F037
TITLE	VPD			☐ Delete	TITLE						☐ Change	Addition	] 6
NAME	STOKES, B				NAME								1
STREET ADDRESS 5455 GARDEN GROVE BLVD SUITE 144						ET ADDRESS							
CITY-ST-ZIP		TER CA 92683			CITY-	ST-ZIP							1
TITLE	SD		-	☐ Delete	TITLE						Change	☐ Addition	
NAME	SESSA, BA				NAME	l l							
STREET ADDRESS CITY-ST-ZIP		ORD AVE				T ADDRESS ST-ZIP							
	NORFOLK	VA 23000											-
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2. I hereby certify that the information supplied with this fling 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 employered to excluse 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 at other like empowered.

SIGNATURE:

SIGNATUICEREQUIRED

3/14/03 727.726.147