

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90114 019 ****61.25

DOCUMENT # F96000000589

1. Entity Name

ALL NATIONS PENTECOST CHURCH OF JESUS CHRIST, IN C.

Principal Place of Business

**ALL NATIONS PENTECOST CHURCH
 11878 W DIXIE HWY
 N MIAMI FL 33161
 US**

Mailing Address

**ALL NATIONS PENTECOST CHURCH
 11878 W DIXIE HWY
 N MIAMI FL 33161
 US**

2. Principal Place of Business

3. Mailing Address

102 N. 13th St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Phoenix, AZ

Zip

Country

Zip

Country

85034

USA

4. FEI Number

86-0469320

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

**PHILOCIN, PIERRE V
 11878 W DIXIE HWY
 MIAMI FL 33161**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
 NAME **CP**
 STREET ADDRESS **LORING, ARTHUR**
 CITY-ST-ZIP **102 N. 13TH ST. PHOENIX AZ 85034**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **ST**
 STREET ADDRESS **LORING, HARRIET**
 CITY-ST-ZIP **102 N. 13TH ST. PHOENIX AZ 85034**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **ARBuckle, WILLIE**
 CITY-ST-ZIP **102 N. 13TH ST. PHOENIX AZ 85034**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **TOMLIN, ELIZABETH**
 CITY-ST-ZIP **102 N. 13TH ST. PHOENIX AZ 85034**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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 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:

ARTHUR LORING

2/4/02

602-252-1850

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)