FILED

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

Apr 23, 2003 8:00 am § Secretary of State DOCUMENT # **F98000001680** 04-23-2003 90112 002 ****61.25 1. Entity Name PENTECOSTAL GOSPEL TEMPLE (INC.) Principal Place of Business Mailing Address 111 WINDWARD ROAD 111 WINDWARD ROAD KINGSTON 2 KINGSTON 2 JAMAICA, W.I. JAMAICA, W.I. 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number NOT APPLICABLE Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent المنجاب في بيريفونة STEWART, CAROLYN A Street Address (P.O. Box Number is Not Acceptable) 441 S. STATE RD 7 STE 9 MARGATE FL 33068 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 相關語 基 河蓝 八年 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Change Addition TITLE ☐ Delete TITLE NAME STEWART, CARMEN L REV. NAME STREET ADDRESS 111 WINDWARD ROAD, KINGSTON 2 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Jamaica, Wi ☐ Addition ☐ Delete ☐ Change TITLE TITI E NAME KEANE, ENID NAME STREET ADDRESS 111 WINDWARD ROAD, KINGSTON 2 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JAMAICA, WI - بدرينين دريني درين TITLE Delete TITLE THOMPSON, FREDERICK REV. NAME NAME STREET ADDRESS 54 SLIPE ROAD, KINGSTON 5 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JAMAICA, WI ☐ Change Addition TITLE Delete TITLE PHILLIPS, CHARLES NAME NAME STREET ADDRESS 2 C TAVISTOCK TERRACE, KINGSTON 6 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JAMAICA, WI TITLE ☐ Delete TITLE ☐ Change Addition STEWART, ROBERT NAME NAME STREET ADDRESS 34 MONTCLAIR DRIVE, KINGSTON 6 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JAMAICA, WI TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-7IP

SIGNATURE

CITY-ST-ZIP

2003/01/24

876-428-9614