2002 UNIFORM BUSINESS REPORT (UBR)

Sep 09, 2002 8:00 am Secretary of State DOCUMENT # **F98000001977** 09-09-2002 90027 024 ****61.25 SANCTUARY CHURCH OF THE OPEN DOOR, INC. Principal Place of Business Mailing Address 5923-41 WALNUT ST 5923-41 WALNUT ST PHILADELPHIA PA 19139 PHILADELPHIA PA 19139 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 23-7442379 Not Applicable Zip Country Zip 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 Gilbert McFarland Street Address (P.O. Box Number is Not Acceptable) WILSON, LAFAWN Lago Delray Condominiums 68 W. 11TH STREET 2800 Fiore Way RIVIERA BEACH FL 33404 City Delray Beach 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. ature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) After September 13, 2002, 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. min. will be \$236.25. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME BRONSON, AUDREY F BISHOP NAME STREET ADDRESS 1601 N. 72ND ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PHILADELPHIA PA 19151 TITLE VCVS ☐ Delete ☐ Addition ☐ Change NAME CARLTON, BECKY M DR NAME STREET ADDRESS STREET ADDRESS 1601 N. 72ND ST CITY-ST-ZIP PHILADELPHIA PA-19151 CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change ☐ Addition BRONSON, OSWALD P NAME NAME STREET ADDRESS 107 PINE CONE CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DAYTONA BEACH FL 32119 TD ☐ Delete TITLE ☐ Change Addition NAME WELLS, LEONARD R NAME STREET ADDRESS 1622 N. 72ND ST STREET ADDRESS CITY-ST-7IP PHILADELPHIA PA 19151 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Chance Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition 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-ZIP

SIGNATURE:

CITY-ST-ZIP

8/27/17 (215) 7110 1510

FILED