

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

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90323 005 ****70.00

DOCUMENT # F98000002476

1. Entity Name
JESUS HOLINESS CHURCH, INC.



Principal Place of Business

**20 SUN COUNTRY COURT
EUSTIS FL 32726**

Mailing Address

**20 SUN COUNTRY COURT
EUSTIS FL 32726**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **23-7072006**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**EVANS, FRANCES M CP
20 SUN COUNTRY COURT
EUSTIS FL 32726**

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. 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)

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VCV	<input type="checkbox"/> Delete
NAME	EVANS, LARRY BRUCE JR	
STREET ADDRESS	2665 W LAKE SAMM PKY SE	
CITY-ST-ZIP	BELLEVUE WA 98008	
TITLE	VCV	<input type="checkbox"/> Delete
NAME	EVANS, FRANCES M	
STREET ADDRESS	20 SUN COUNTRY COURT	
CITY-ST-ZIP	EUSTIS FL 32726	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GATES, THELMA O	
STREET ADDRESS	10021 61ST AVE. SOUTH	
CITY-ST-ZIP	SEATTLE WA 98178	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	JONES, WILLIAM V	
STREET ADDRESS	16455 S.E. 39TH	
CITY-ST-ZIP	BELLEVUE WA 98008	
TITLE	S	<input type="checkbox"/> Delete
NAME	GATES, THELMA O	
STREET ADDRESS	10021 61ST AVE., SOUTH	
CITY-ST-ZIP	SEATTLE WA 98178	
TITLE	D	<input type="checkbox"/> Delete
NAME	BASS, MATTIE J	
STREET ADDRESS	11022 S.E. 269TH STREET	
CITY-ST-ZIP	KENT WA 98031	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Patricia A. Tanner	
STREET ADDRESS	4175 W. LK. SAM. PKY, SE #205	
CITY-ST-ZIP	Belle vue WA, 98008	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D. Rashelle C. Tanner	
STREET ADDRESS	4115-178th Pl. LANE	
CITY-ST-ZIP	Belle vue WA, 98008	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	D Carl F. Murray	
STREET ADDRESS	4324 Williamsburg court	
CITY-ST-ZIP	Orlando Florida 32808	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	D Geraldine Murray	
STREET ADDRESS	4324 Williamsburg court	
CITY-ST-ZIP	Orlando Florida 32808	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Frances M. Evans* **FRANCES M. EVANS** April 14, 2003 352 5895987

CR2E037 (10/02)