2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F98000004434

Entity Name: CHURCH OF GOD, AN INTERNATIONAL COMMUNITY, INC.

FILED Jan 18, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
476 S. MARENGO AVENUE PASADENA, CA 911013129 US						
Current Mailing Address:			New Maili	New Mailing Address:		
P O BOX 91150 PASADENA, CA 911091150 US						
FEI Number: 33-0798049 FEI Number Applied For () FEI Number			FEI Number Not App	mber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
PAGE, LEE 16409 BEARLE RD. ORLANDO, FL 328285408 US						
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:						
Electronic Signature of Registered Agent				Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PCD ()[HULME, DAVID 740 CHESTER A SAN MARINO, CA		Title: Name: Address: City-St-Zip:	HULME, DAV 476 S MAREI		
Title: Name: Address: City-St-Zip:	STD () [ANDREWS, STE 24706 CLARING LAGUNA HILLS,	TON	Title: Name: Address: City-St-Zip:	(() Change() Addition	
Title: Name: Address: City-St-Zip:	D () [ANDERSON, JOH 288 ELKHORN D DUARTE, CA		Title: Name: Address: City-St-Zip:	(()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () E ORCHARD, BRIA 320 ELKHORN D DUARTE, CA 91	RIVE	Title: Name: Address: City-St-Zip:	D (ORCHARD, E 2/45 ARGYLE MACLEOD, V	E ST	
Title: Name: Address: City-St-Zip:	D () E STEPP, EDWIN 2586 STARCRES DUARTE, CA 91		Title: Name: Address: City-St-Zip:	STEPP, EDW 851 MAGNOL	(X) Change ()Addition /IN LIA AVE APT 17 CA 91106 US	
Title: Name: Address:	NATHAN, PETER 3 COLLAROY GL		Title: Name: Address: City-St-Zip:	D (NATHAN, PE ⁻ 320 ELKHOR	N DR	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN D. ANDREWS STD 01/18/2002