FILED 2002 UNIFORM BUSINESS REPORT (UBR) Aug 27, 2002 8:00 am Secretary of State DOCUMENT # K66256 1. Entity Name 08-27-2002 90118 002 ***150.00 CERTAIN SOUND MINISTRIES, INC. Principal Place of Business Mailing Address %EDINGTON. HOWARD %EDINGTON, HOWARD 1055 EDGEWATER DRIVE 1055 EDGEWATER DRIVE ORLANDO FL 32804 ORLANDO FL 32804 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2947144 Not Applicable Zip 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 **EDINGTON. HOWARD** Street Address (P.O. Box Number is Not Acceptable) 1055 EDGEWATER DRIVE ORLANDO FL 32804 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) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing After September 13, 2002 Fee will be \$750.00 \$5.00 May Be Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition EDINGTON, HOWARD NAME NAME STREET ADDRESS 1055 EDGEWATER DRIVE STREET ADDRESS CITY-ST-ZIP ORLANDO FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS Boign affiles CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filipe bes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information occurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if indicated on this report or supplemental report of the corporation or the receiver of trustee em changed, or on an attachment

CITY-ST-7IP

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE.

NAME

☐ Delete

Date

Daytime Phone #

☐ Change

☐ Addition



976799

August 20, 2002

K66256

Florida Department of State Katherine Harris Secretary of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

To whom it may concern:

We are requesting that you waive the late fee for this payment, as we did not receive the 2002 UBR report form prior to this notice and form received in late July.

Howard Edungton

JHE/pt

Very truly yours.

THE HEART OF THE CITY

Dr. Howard Edington, Sr. Pastor