

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 14, 2001 8:00 am
Secretary of State

09-14-2001 90008 033 ****75.75

DOCUMENT # N00000001509

1. Entity Name

THE NEW CHURCH OF GOD PROPHETICALLY, INC.

Principal Place of Business

16691 SW 21ST AVE RD
 Ocala FL 34473

Mailing Address

16691 SW 21ST AVE RD
 Ocala FL 34473

2. Principal Place of Business

5086 SE 102nd Place

Suite, Apt. #, etc.

LOT-E-21

City & State

BELLVIEW FL

Zip

34420

Country

MARION

3. Mailing Address

5086 SE 102nd Place

Suite, Apt. #, etc.

LOT-E-21

City & State

BELLVIEW FL

Zip

34420

Country

MARION



DO NOT WRITE IN THIS SPACE

4. FEI Number

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROBLES, RAMIRO P
 16691 SW 21ST AVE RD
 Ocala FL 34473

7. Name and Address of New Registered Agent

Name **BASILIO RODRIGUEZ**
 Street Address (P.O. Box Number is Not Acceptable)
5086 SE 102nd Place
 City **BELLVIEW** FL Zip Code **34420**

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.

SIGNATURE *Basilio Rodriguez*
 Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

09-12-01

DATE

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE **NATIONAL DIRECTOR** Delete
 NAME **RAMIRO ROBLES-P**
 STREET ADDRESS **1691 S-W 21ST AVE RD**
 CITY-ST-ZIP **OCALA, FL 34473**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
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TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **SENIOR PASTOR - S-D** Change Addition
 NAME **BASILIO RODRIGUEZ**
 STREET ADDRESS **5086 SE 102ND PLACE LOT-E-21**
 CITY-ST-ZIP **BELLVIEW, FL 34420**

TITLE **TREASURER - SECRETARY** Change Addition
 NAME **LYDIA E. RODRIGUEZ**
 STREET ADDRESS **5086 SE 102ND PLACE LOT-E-21**
 CITY-ST-ZIP **BELLVIEW, FL 34420**

TITLE **C/M-D** Change Addition
 NAME **RAMIRO ROBLES P**
 STREET ADDRESS **16691 S/W 21ST AVE RD**
 CITY-ST-ZIP **OCALA, FL 34473**

TITLE **V-PRESIDENT** Change Addition
 NAME **BENJAMIN VEGA**
 STREET ADDRESS **Box 753**
 CITY-ST-ZIP **Barrio DAGUO NAGUABO Puerto Rico**

TITLE **P-PRESIDENT** Change Addition
 NAME **JOSE L. MEDINA**
 STREET ADDRESS **Box 753**
 CITY-ST-ZIP **Barrio DAGUO Naguabo P.R.**

TITLE Change 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: *Basilio Rodriguez*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09-12-01

Date

352-454-4713

Telephone #

CR2E037 (5/01)