

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

FILED
Feb 07, 2003 8:00 am
Secretary of State

02-07-2003 90057 050 ****61.25

DOCUMENT # N00000002387

1. Entity Name

FRESH FIRE WORSHIP CENTER, INC.



Principal Place of Business

**102 CHAPEL DR.
TALLAHASSEE FL 32304**

Mailing Address

**102 CHAPEL DR.
TALLAHASSEE FL 32304**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

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

**PETTIS, REV. CHARLES
~~1072 COE LANDING RD.~~
TALLAHASSEE FL ~~32310~~**

Name

Street Address (P.O. Box Number is Not Acceptable)

7719 Cornucopia Ln.

City

Tallahassee

FL

Zip Code

32309

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 **PD** ☐ Delete
NAME **PATTIS, CHARLES R**
STREET ADDRESS **1072 COE LANDING RD**
CITY-ST-ZIP **TALLAHASSEE FL 32310**

TITLE **P/D** ☒ Change ☐ Addition
NAME **PETTIS, R. Charles**
STREET ADDRESS **7719 Cornucopia Ln.**
CITY-ST-ZIP **Tallahassee, FL 32309**

TITLE **VSTD** ☐ Delete
NAME **PATTIS, CYNTHIA F.**
STREET ADDRESS **1072 COE LANDING RD**
CITY-ST-ZIP **TALLAHASSEE FL 32310**

TITLE **P/D** ☒ Change ☐ Addition
NAME **PETTIS, Cynthia F.**
STREET ADDRESS **7719 Cornucopia Ln.**
CITY-ST-ZIP **Tallahassee, FL 32309**

TITLE **D** ☐ Delete
NAME **JONES, CYNTHIA A**
STREET ADDRESS **12438 BLOUNTSTOWN HWY**
CITY-ST-ZIP **TALLAHASSEE FL 32310**

TITLE **D** ☒ Change ☐ Addition
NAME **Jones, Cynthia A.**
STREET ADDRESS **5203 S.E. Shellcracker Ave.**
CITY-ST-ZIP **Blountstown FL 32424**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

RICHARD PATTIS

R. Charles Pettis, P.D. 2/4/03

(850)

350-2022

CR2E037 (10/02)