

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

FILED
Apr 10, 2002 8:00 am
Secretary of State

02-21-2002 90328 016 ****70.00

DOCUMENT #

1. Entity Name

Apostolic Church of God in Christ

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

279 S.W. 27th Ave.

3. Mailing Address

P.O. Box 121446

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Ft. Lauderdale, Fl.

City & State

Ft. Lauderdale, Fl.

4. FEI Number

59-3640194

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

THOMAS McLEMORE

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

660 N.W. 38th Avenue

City

Ft. Lauderdale

FL

Zip Code

33311

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

**FEE IS \$61.25
Initial or Amended UBR**

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
NAME
STREET ADDRESS
CITY - ST - ZIP
*President - P
THOMAS McLEMORE
660 N.W. 38th Ave.
Ft. Lauderdale, Fl. 33311* (D)

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
*V
Essie McLEMORE
660 N.W. 38th Ave.
Ft. Lauderdale, Fl. 33311* (T)

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
*S
Christopher Bryant
660 N.W. 38th Ave.
Ft. Lauderdale, Fl. 33311* (T)

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE

Thomas McLEMORE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/02

Date

954-585-3941

Daytime Phone #

CR2E037B (12/01)