2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000004681

Address:

City-St-Zip:

1322 PALM DR

APOPKA, FL 32703

Entity Name: EASTSIDE VINEYARD CHRISTIAN FELLOWSHIP, INC.

FILED Sep 07, 2002 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
308 LIVE (CASSELB	DAK BLVD ERRY, FL 3:	2707					
Current Mailing Address:				New Mailing Address:			
308 LIVE (CASSELB	DAK BLVD ERRY, FL 3:	2707					
FEI Number: 59-3656296 FEI Number Applied For () FEI N) FEI Nu	mber Not Appl	icable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
OVIEDO, F	STONE CT FL 32765 named entit e of Florida.	y submits this statement fo	r the purpose (of changing i	ts register	ed office or registered agent, or both,	
	Electro	onic Signature of Registere	ed Agent			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DP MCDONALD, 2156 FIREST OVIEDO, FL	ONE CT		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	STEARNS, J	SEVELT STE 107		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name:	DST PLATE, APRI	() Delete L		Title: Name:	DST PLATE, AI	(X) Change()Addition PRIL	

Address:

City-St-Zip:

409 SUMMIT RIDE PLACE #113

LONGWOOD, FL 32779

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.

09/07/2002 SIGNATURE: APRIL PLATE DST