

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

FILED
Feb 04, 2003 8:00 am
Secretary of State

02-04-2003 90097 005 ****61.25

DOCUMENT # N01000000018



1. Entity Name
**THE GENERAL CONFERENCE OF THE CHURCH OF GOD OF T
HE FIRST BORN, INC.**

Principal Place of Business

**720 S. KANSAS AVE.
NEWTON KS 67114**

Mailing Address

**PO BOX 1041
NEWTON KS 67114**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **48-1072777**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CORONADO, ADOLFO
148 S. MADISON AVE.
CENTER HILL FL 33514**

7. Name and Address of New Registered Agent

Name

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

City

FL

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

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

TITLE	PD	<input type="checkbox"/> Delete
NAME	ETTERMAN, JAMES A SR	
STREET ADDRESS	PO BOX 1041	
CITY-ST-ZIP	NEWTON KS 67114-1041	
TITLE	VP	<input type="checkbox"/> Delete
NAME	BRYANT, JERRY	
STREET ADDRESS	1908 S BONN	
CITY-ST-ZIP	WICHITA KS 67213	
TITLE	SD	<input type="checkbox"/> Delete
NAME	LOPEZ, PAUL	
STREET ADDRESS	PO BOX 155	
CITY-ST-ZIP	TULIA TX 79088	
TITLE	TD	<input type="checkbox"/> Delete
NAME	MEYER, WILLIAM D	
STREET ADDRESS	714 WEST HAVEN DRIVE	
CITY-ST-ZIP	NEWTON KS 67114	
TITLE	CD	<input type="checkbox"/> Delete
NAME	MINOR, ERNEST	
STREET ADDRESS	200 S HEAD	
CITY-ST-ZIP	BELTON TX 76513	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *James A. Etterman Sr.* **JAMES A. ETTERMAN SR.** 1-31-03 956-943-1415

CR2E037 (10/02)