


FILED
Jul 24, 2003 8:00 am
Secretary of State

07-24-2003 90117 044 ****70.00

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

DOCUMENT # N01000000203			
1. Entity Name VISIONARIES Church of God In Christ			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 606 N. Main Street		3. Mailing Address 4248 NW 36th Street	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Gainesville Florida		City & State Gainesville Florida	
Zip 326	Country U.S.	Zip 32605	Country U.S.A.
4. FEI Number		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent			
Name JESSE B. BROWN			
Street Address (P.O. Box Number is Not Acceptable) 4248 N.W. 36th Street			
City Gainesville		FL Zip Code 32605	
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 _____ (NOTE: Registered Agent signature required when reappointing) _____ DATE _____			
FEE IS \$61.25 Initial or Amended UBR		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
DIRECTOR JESSE B. BROWN (D) 4248 NW 36th Street Gainesville Florida 32605			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
DIRECTOR EDWARD CASON 625 S.W. 127th Street Newberry Florida 32669			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
DIRECTOR DARRELL W. RUSSELL (D) 3111 N.W. 49th St. Gainesville FL 32605			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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: <u>Jesse B. Brown</u>		7-21-03 352-376 5440	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Basis: Basis: Florida Statute 4	

CR2E037B (12/02)