

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 06, 2002 8:00 am
Secretary of State

07-02-2002 90811 021 ***70.00

DOCUMENT # N01000001623

1. Entity Name:

THE OLIVE BRANCH, INC.

Principal Place of Business

745 WOODS AVENUE
ORLANDO FL 32805

Mailing Address

745 WOODS AVENUE
ORLANDO FL 32805

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEL Number

59-3708878

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

WAUGH, UYLEE R
 381 IOWA WOODS CIRCLE, WEST
 ORLANDO FL 32824

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 reinstating)

DATE

FILE NOW: FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP |
|-------|------|----------------------|---|-------|----------|-------------------------|---|
| | D | MATHEWS-PRYOR, ROSA | 1633 MESSINA AVENUE ORLANDO FL 32839 | | Director | Rev. Dr. Uylee R. Waugh | 381 Iowa Woods Circle West Orlando, FL 32824 |
| | D | DAVIS, LARONE | 2632 ROBERT TRENT JONES DRIVE ORLANDO FL 32835 | | | | |
| | D | HARGROVE, SYLVIA | 820 BETHUNE DRIVE ORLANDO FL 32805 | | | | |
| | Boys | Matthews-Pryor, Rosa | 1633 Messina Avenue Orlando, FL 32839 | | | | |
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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)

Attachment
40729

August 2, 2002

The Olive Branch, Inc.
745 Woods Avenue
Orlando, FL 32805

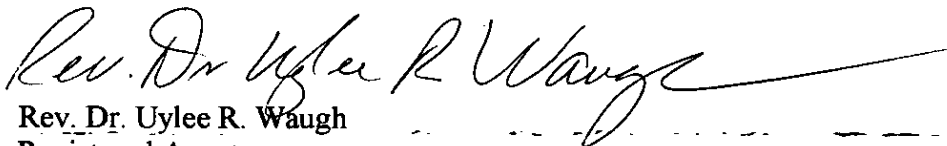
Florida Department of State
Annual Reports Section
Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

Dear Sirs:

In reference to your letter of July 10, 2002 (Reference Number: N01000001623) please find enclosed our corrected annual report/uniform business report.

If further information is required I can be reached at (407)425-7303.

Respectfully submitted,


Rev. Dr. Uylee R. Waugh
Registered Agent