BANGER OF PRINCIPAL PRINCI

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01000001915

1. Entity Name

ZION'S HOPE INTERNATIONAL FULL GOSPEL MINISTRIES OF ALL NATIONS TRUST AND CHRISTIAN LADIES CLUB,

FILED Aug 25, 2002 8:00 am Secretary of State

08-25-2002 90206 002 ****61.25 08-25-2002 90206 001 ****8.75

Principal Place of Business		Mailing Address						
4001 N 34 STREET		4001 N 34 STREET		1		មប្រក្រុ	υ	
TAMPA FL 3	3610	TAMPA FL 33610		İ				
ļ				4 44 8211 81 411 1		*************	1881 8 711 7 88 1	
2. Principal	Place of Business	3. Mailing Address						
4001 N 34th Street		1405 E. EIM Street Suite, Apt. #, etc.		.	10101 (1911 9011) 001)1 00 <i>1</i> 11 001(1	11/11 0 1/10	180) Bill 189)	
Suite, Ap	ot. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN TH	IS SPACE		
City & Sta	ato	Oliver Olive					•	
Tampa Horida		Tampa, Horida		4. FEI Number			pplied For	
Zip	Country	Zip	Country				ot Applicable	
3361	O Hills. (USA)	33604	Hills CUSP	5. Certificate of S	Status Desired 🖫	\$8.75 Ad Fee Require	ditional ed	
	6. Name and Address of Current	Registered Agent		7Name and Ad	dress of New Registere	d Agent		
			Name		\			
WIGGINS, JULIA A			Street Ad	Street Address (P.O. Box Number is Not Acceptable)				
915 E LOUISIANA AVE								
TAMPA FL 33602								
			City		\ F	Zip Co	le	
8. The abov	re named entity submits this statement for	the purpose of changing its	registered office or r	egistered agent, or both, in	n the State of Florida. I a	m familiar with.	and accept	
the obliga	ations of registered agent.	4					and addop.	
	. A.	4						
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTI	Registered Agent signature	required when reinstation)	DATE			
						·		
	After September 13, 2002,	9. Election Car	npaign Financing	¢= 00	Make Che	ak Davabla		
	min. will be \$236.25.	Trust Fund C		\$5.00 May Be Added to Fees		ck Payable ent of State		
	·				Jopanan	one or orace		
10.	OFFICERS AND DIR		11.		SES TO OFFICERS AND I	DIRECTORS IN	10	
TITLE NAME	President/CEO	☐ Delete		Asst. Secretary	/Trustee	Change	Addition	
STREET ADDRESS	Julia A. Wiggins			disa Hutchinson 1826 Beechwood	Pleat			
CITY-ST-ZIP	TAMPA FL 33604							
TITLE	VICE PRESIDENT	□ Delete		AMPA, FL 336		Brit Ohann		
NAME	Abraham J. Hill		NAME	rustee/CHAIRMI lobert Powell	HA OF THE DEMOST	r est i cuange	■ Addition	
STREET ADDRESS	1405 EAST ELM AVE. STO	ध्व		214 51 Ave			,	
CITY-ST-ZIP	TAMPA . FL 33604	٠ الماريونيات ١		PALM River F				
TITLE	Secretary	☐ Delete	TITLE~	rvistee '		☐ Change	Addition	
NAME	Chrysantheum C. Dicken	5	NAME J	o Anne Spradley				
STREET ADDRESS CITY-ST-ZIP	14254 10th AVE. FAST			815 Basswood Le				
	TAMPA, FL 33605		CITY-ST-ZIP	Orlando, FL	32805			
TITLE NAME	Trustee		Y1Y1 F			_ a.	Addition	
-		☐ Delete	TITLE	Puesec C	•	Change	6.2	
STREET ADDRESS	Annita Williams	□ Delete	NAME	Trustee Annita Williams	3	∐ Change		
STREET ADDRESS CITY-ST-ZIP	Annita Williams 4695 15th Ave, South		NAME STREET ADDRESS 2	Fustee Annita Williams 1695 15th Ave. 1	วังงาน	∟ Change		
	Annita Williams	-	NAME STREET ADDRESS CITY-ST-ZIP	Trustee Annita Williams	วังงาน			
CITY-ST-ZIP	Annita Williams 4695 15th Ave, South		NAME STREET ADDRESS CITY-ST-ZIP TITLE	Fustee Annita Williams 1695 15th Ave. 1	วังงาน	Change	☐ Addition	
CITY-ST-ZIP	Annita Williams 4695 15th Ave, South	-	NAME STREET ADDRESS CITY-ST-ZIP	Fustee Annita Williams 1695 15th Ave. 1	วังงาน			
CITY-ST-ZIP TITLE NAME	Annita Williams 4695 15th Ave, South	-	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Fustee Annita Williams 1695 15th Ave. 1	วังงาน			
CITY-ST-ZIP TITLE NAME STREET ADDRESS	Annita Williams 4695 15th Ave, South	-	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Fuster Annita Williams 1695 15th Ave, 1 St. Petersburg, F	Zouni L	Change	Addition .	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Annita Williams 4695 15th Ave, South	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Annita Williams Annita Williams 1695 15th Ave. St. Petersburg, F	Sound L	☐ Change	Addition Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Annita Williams 4695 15th Ave, South	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Fuster Annita Williams 1695 15th Ave, 1 St. Petersburg, F	Corn: All above	Change	Addition Addition	

CITY-ST-ZIP be noted as deletions.

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:

DICHATURES EQUIBED CEDIANA.

8-23-02 813-232-5372