

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

DOCUMENT # N01000002764

1. Entity Name  
Shekinah Glory Media, Art, Drama  
Vo-Tech School

FILED

02 NOV 25 PM 12:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
3214 Orange Center Blvd.  
Suite, Apt. #, etc.

3. Mailing Address  
818 E. 7th Street  
Suite, Apt. #, etc.

Suite I

N/A

City & State  
Orlando, FL

City & State  
Sanford, FL

Zip  
32805

Country  
USA

Zip  
32771

Country  
USA

4. FEI Number  
59-3744804

Applied For  
Not Applicable

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

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
Kenneth E. Southward

Street Address (P.O. Box Number is Not Acceptable)  
818 E. 7th Street

City  
Sanford FL Zip Code  
32771

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

FEE IS \$61.25  
Initial or Amended UBR

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SOUTHWARD, KENNETH E. 818 E. 7TH STREET SANFORD, FL 32771	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD FARMER, CLARA S. 607 HICKORY AVENUE SANFORD, FL 32771	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD WILLIAMS, LOUVALLIES 6512 JOHN ALDER WAY ORLANDO, FL 32818	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
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: *Kenneth Southward*

11/21/02 407/322-1377

CR2E037B (12/01)

**SOUTHWARD CONSTRUCTION**

**818 East 7<sup>th</sup> Street - Sanford, FL 32771**

***STUCCO, BLOCK AND CONCRETE***

Licensed and Bonded

(407) 322-1377

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November 21, 2002

Florida Department of State  
Division of Corporations  
Corporate Records  
P. O. Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

Please be advised that you already have in your possession the money order sent with my first application in the amount of \$61.25. Enclosed find my resubmitted application to replace the one that you say was never received.

Very truly yours,

*Kenneth Southward*

Kenneth Southward