

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

06-16-2004 90013 025 *****70.00

N01000002764

DOCUMENT # *N01000002764*

1. Entity Name

*SHEKINAH GLORY MEDIA, ART, DANCE
& VO-TECH SCHOOL*



FILED

04 JUL 21 AM 9:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

66429474

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5308 SILVERSTAR ROAD

Suite, Apt. #, etc.

3. Mailing Address

5308 SILVERSTAR ROAD

Suite, Apt. #, etc.

City & State

ORLANDO, FLORIDA

City & State

ORLANDO, FLORIDA

4. FEI Number

593744804

Applied For

Not Applicable

Zip

32818

Country

ORANGE

Zip

32818

Country

ORANGE

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name *Southward, Kenneth*

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

818 E 7th St

City *Sanford*

FL

Zip Code

32771

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IN THIS SPACE**

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 fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$81.25
Initial or Amended UBR

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 NAME STREET ADDRESS CITY - ST - ZIP	<i>BOARD OF DIRECTORS CHAR. FARNER 1121 LOCUST AVE SAN FORD, FL 32771</i>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>BOARD OF DIRECTORS KENNETH SOUTHWARD 818 EAST 7TH STREET SANFORD, FL 32771</i>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>BOARD OF DIRECTORS CHARLES DUKES 220 WINDCHASE AVE SANFORD, FL 32773</i>
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 Kenneth Southward 5-28-04*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Define Phone #

CR2E0378 (12/02)