

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

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90192 007 ****61.25

DOCUMENT # **NO1000003360** ✓

1. Entity Name

MARANATHA CHRISTIAN FELLOWSHIP

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

397-69th St. N

3. Mailing Address

397-69th St. N

Suite, Apt. #, etc.

CLEARWATER **FL**

Suite, Apt. #, etc.

FL

City & State

Clearwater, Florida

City & State

Clearwater, FL 33764

4. FEI Number

N/A

Applied For

☒ Not Applicable

Zip

33764

Country

USA

Zip

33764

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Rev. DORIS Scott

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

397-69th Street N.

Clearwater, FL

City **Clearwater, FL**

FL

Zip Code

33764

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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.

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	P/O Rev DORIS Scott 397-69th St. N Clearwater, FL 33764
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARDETH E. ARNOLD 397-69th St. N Clearwater, FL 33764
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REV. David Turley 10870-62nd Ave N Seminole, FL 33772
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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)(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: **Doris Scott Rev. David Scott**

4/24/2002 727-536-3942

CR2E037B (12/01)