

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000006234

FILED
Jan 30, 2002 8:00 AM
Secretary of State

Entity Name: SHEKINAH MOUNTAIN BIBLE FELLOWSHIP, INC.

Current Principal Place of Business:

PO BOX 934754
MARGATE, FL 33093

New Principal Place of Business:

PO BOX 15365
PLANTATION, FL 33318

Current Mailing Address:

PO BOX 934754
MARGATE, FL 33093

New Mailing Address:

PO BOX 15365
PLANTATION, FL 33318

FEI Number: 65-1128376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAW FIRM OF NADEGE ELLIOTT, ESQ.
2505 SECOND STREET
SUITE 204
FORT MYERS, FL 33091

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SINGLETARY, MEREDITH W REV.
Address: 193 WIMBLEDON LAKES DRIVE
City-St-Zip: PLANTATION, FL 33324

Title: DV () Delete
Name: SINGLETARY, SAN W
Address: 193 WIMBLEDON LAKES DRIVE
City-St-Zip: PLANTATION, FL 33324

Title: D () Delete
Name: WILBURN, RUBY J DR.
Address: 904 JAN MAR COURT SUITE A
City-St-Zip: CLERMONT, FL 34711

Title: D (X) Delete
Name: DEAL, ANGELA
Address: 3775 NW 106 DRIVE
City-St-Zip: CORAL SPRINGS, FL 33066

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAN W. SINGLETARY

DV

01/30/2002

Electronic Signature of Signing Officer or Director

Date