

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90108 002 ****61.25

DOCUMENT # N01000006318

1. Entity Name

**THE MINISTRY OF FAITH IN JESUS CHRIST THE LIVING
GOD INC.**



Principal Place of Business

**805 W MEMORIAL BLVD
LAKELAND FL 33805**

Mailing Address

**4156 WILLOW DR SOUTH
MULBERRY FL 33860**

2. Principal Place of Business

805 W. Memorial Blvd

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Lakeland FL.

City & State

Zip

33805

Country

USA

Country

4. FEI Number **73-1641985**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HAMILTON, JR., RICHARD REV.
4156 WILLOW DR SOUTH
MULBERRY FL 33860**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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 **DP** ☐ Delete
NAME **HAMILTON, JR., RICHARD REV.**
STREET ADDRESS **4156 WILLOW DR SOUTH**
CITY-ST-ZIP **MULBERRY FL 33860**

TITLE **TD** ☐ Delete
NAME **HAMILTON, LESTER D BRO.**
STREET ADDRESS **733 BRYON CT**
CITY-ST-ZIP **LAKELAND FL 33810**

TITLE **TV** ☒ Delete
NAME **HAMILTON, SR., RICHARD BRO.**
STREET ADDRESS **1631 W 7 ST**
CITY-ST-ZIP **LAKELAND FL 33805**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: **Richard Hamilton Jr.**

03-26-03 (863) 486516

CR2E037 (10/02)