2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000006816

Entity Name: ARISE CHRISTIAN CENTER INC

FILED Sep 12, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6612 OLD KINGS RD., N. JACKSONVILLE, FL 32219 **Current Mailing Address: New Mailing Address:** 11011 HARTS RD 1205 JACKSONVILLE, FL 32218 FEI Number: 59-3751497 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **BUSINESS FILINGS INCORPORATED** 660 EAST JEFFERSON STREET TALLAHASSEE, FL 323010000 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete NEALY, MYRISHA Name: Name: 850 LEBRUN DR. Address: Address: City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: Title: () Delete Title: (X) Change () Addition THOMPSON, NATALIE Name: Name: WARREN, JESSE Address: 5959 FT. CAROLINE RD., #1205 Address: 813 W. 29TH STREET City-St-Zip: JACKSONVILLE, FL 32277 City-St-Zip: JACKSONVILLE, FL 32209 Title: () Delete Title: () Change () Addition LESTER, LINDA MRS. Name: Name: 850 LEBRUN DR. Address: Address: City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: Title: () Delete Title: () Change () Addition Name: LESTER, JESSIE M MS. Name: 11011 HARTS RD., #1205 Address: Address: City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: Title: () Delete Title: VΡ (X) Change () Addition HARDAWAY, ALTAMESE MRS. WARREN, MIZPAH MRS. Name: Name: 3203 CLYDE DRIVE 813 W. 29TH STREET Address: Address: City-St-Zip: JACKSONVILLE, FL 32208 City-St-Zip: JACKSONVILLE, FL 32209 Title: () Delete Title: (X) Change () Addition CHASE, PAULINE MRS. WILLIS, LAKESHA MS. Name: Name: Address: 4851 AMOS STREET Address: 3875 SAN PABLO RD. SOUTH, # 1102 JACKSONVILLE, FL 32208 JACKSONVILLE, FL 32224 City-St-Zip: 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: JESSIE M. LESTER P 09/12/2003