2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 AM
Secretary of State

DOCUMENT# N01000007113

Entity Name: GLENNCOVE COMMUNITY CHURCH AND SCHOOL OF HOMESTEAD, INC.

Current Principal Place of Business:

30321 SOUTHWEST 172ND AVENUE
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

PO BOX 900956
HOMESTEAD, FL 33090

New Mailing Address:

FEI Number: 65-1144636 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

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: PD ( ) Delete
Name: IVY, TIMOTHY
Address: 30321 SOUTHWEST 172ND AVENUE
City-St-Zip: HOMESTEAD, FL 33030

Title: VD ( ) Delete
Name: GLENN, CHARLEY
Address: 30321 SOUTHWEST 172ND AVENUE
City-St-Zip: HOMESTEAD, FL 33030

Title: SD ( ) Delete
Name: SADDLER, GALE
Address: 30321 SOUTHWEST 172ND AVENUE
City-St-Zip: HOMESTEAD, FL 33030

Title: TD (X) Delete
Name: TERRELL, BARRY
Address: 30321 SOUTHWEST 172ND AVENUE
City-St-Zip: HOMESTEAD, FL 33030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: STD (X) Change ( ) Addition
Name: SADDLER, GALE
Address: 30321 SOUTHWEST 172ND AVENUE
City-St-Zip: HOMESTEAD, FL 33030

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: GALE SADDLER STD 03/27/2002

Electronic Signature of Signing Officer or Director — Date