## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N01000008705

City-St-Zip:

TAMPA, FL 33617

Entity Name: BREATH OF LIFE FELLOWSHIP CHURCH, INC.

FILED Sep 10, 2003 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
3350 W. HILLSBOROUGH SUITE #218 TAMPA, FL 336145876				6424 NORTH ARMENIA AVENUE SUITE #A TAMPA, FL 33604 US			
Current Mailing Address:				New Mailing Address:			
SUITE #21	HILLSBOROUG 18 L 336145876	н					
FEI Number: 68-0519112 FEI Number Applied For ( ) FEI Number			FEI Number	mber Not Applicable ( ) Certificate of Status Desired (X)			
Name and	d Address of C	urrent Registered Agent:	Na	me and	Address	of New Registered Agent:	
3350 W. F SUITE #21 TAMPA, F The above	L 336145876		purpose of ch	anging i	ts registere	ed office or registered agent, or both,	
SIGNATUI	RF <sup>.</sup>						
0.017.110.		ic Signature of Registered Ag	jent			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () ROLLINS, JESS 3350 W. HILLS TAMPA, FL 330	BOROUGH				( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ROBERTSON,	BOROUGH AVE, #218				() Change () Addition	
Title: Name: Address: City-St-Zip:	T () RUTLEDGE, G\ 5219 EL TORO TAMPA, FL					(X) Change ( ) Addition ROLLINS, ALLIE M EMMA STREET 33610 US	
Title: Name: Address: City-St-Zip:	T () MCCLELLAN, E 4632 1/2 CENT ST. PETE, FL	RAL AVE.			6565 OSPF	(X) Change()Addition E, SHARON D REY LAKE CIRCLE V, FL 33569 US	
Title: Name: Address:	T (X) CUNNINGHAM, 13452 VILLAGE		Title Nar Add			( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: JESSIE R. ROLLINS, II P 09/10/2003