

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

FILED
Jul 31, 2003 8:00 am
Secretary of State

07-31-2003 90066 027 ****61.25

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DOCUMENT # N02000000466

1. Entity Name

CORNERSTONE CHURCH OF THE LIVING GOD, INC.



Principal Place of Business

7823 LONGHORN CIRCLE E.
JACKSONVILLE FL 32224-7070

Mailing Address

POST OFFICE BOX 7738
JACKSONVILLE FL 32238-7738

2. Principal Place of Business

4808 Highway Ave
Suite, Apt. #, etc.

3. Mailing Address

4808 Highway Ave
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

Jacksonville, FL

City & State

Jacksonville FL

4. FEI Number **58-2323565**

Applied For

Not Applicable

Zip **32254**

Country **Duval**

Zip **32254**

Country **Duval**

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BUNDAGE, DARLENE D
7823 LONGHORN CIRCLE E.
JACKSONVILLE FL 32224-7070

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

Darlene D. Bundage

7-29-03

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
After September 10, 2003, min will be \$236.25

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 **CEO** ☐ Delete
NAME **BUNDAGE, DARLENE D**
STREET ADDRESS **7823 LONGHORN CIRCLE E.**
CITY-ST-ZIP **JACKSONVILLE FL 32224-7070**

TITLE **S** ☐ Delete
NAME **KENNEDY, DELOIS**
STREET ADDRESS **3679 PATTI PARKWAY**
CITY-ST-ZIP **DECATUR GA 30034**

TITLE **T** ☐ Delete
NAME **KENNEDY, EDWIN T SR.**
STREET ADDRESS **3679 PATTI PARKWAY**
CITY-ST-ZIP **DECATUR GA 30034**

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

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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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Darlene D. Bundage

Date

Daytime Phone #

7-29-03
9048594669

CR2E037 (4/03)