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

FILED
May 14, 2003 8:00 am
Secretary of State
05-14-2003 90133 040 ****70.00

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DOCUMENT # N02000006376

1. Entity Name
THE REDEEMED CHRISTIAN CHURCH OF GOD, JESUS SANCTUARY, INC.

Principal Place of Business	Mailing Address
5944 LAKE CHAMPLAIN DRIVE ORLANDO FL 32829	5944 LAKE CHAMPLAIN DRIVE ORLANDO FL 32829

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
P.O. BOX 720035 Suite, Apt. #, etc.	P.O. BOX 720035 Suite, Apt. #, etc.
City & State: ORLANDO, FLORIDA	City & State: ORLANDO, FLORIDA
Zip: 32872-0035 Country: U.S.A.	Zip: 32872-0035 Country: U.S.A.

4. FEI Number 02-0638466 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NWOKOYE, GEORGE C PASTOR 5944 LAKE CHAMPLAIN ORLANDO FL 32829	Name: Pastor GEORGE C. NWOKOYE Street Address (P.O. Box Number is Not Acceptable): 4003 MEANDERING CT. City: ORLANDO FL Zip Code: 32822

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] 5/10/2003
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ADEBOYE, ENOCH A 2636 WALNUT HILL LANE #350 DALLAS TX 75229	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	OLADYE, GHANDI 919/921 PHILADELPHIA AVE. SILVER SPRING MD 20910	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FADELE, JAMES 13980 GREENFIELD DETROIT MI 48227	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D OSAKWE, EMMANUEL 1485 S. MARRIETTA PKWY MARRIETTA GA 30067	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	OSAKWE, EMMANUEL 1449 S. MARRIETTA PKWY MARRIETTA, GA 30067	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NWOKOYE, GEORGE C 5944 LAKE CHAMPLAIN DRIVE ORLANDO FL 32829	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

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 5/10/2003 407-282-3797