

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

FILED
Aug 14, 2003 8:00 am
Secretary of State

07-22-2003 90050 029 ****61.25

DOCUMENT # NO2000009681

1. Entity Name

THE FULL GOSPEL CHURCH OF JESUS CHRIST, INCORPORATION



Principal Place of Business

RT 2, BOX 441-C1
LAKE BUTLER FL 32054

Mailing Address

RT 2, BOX 441-C1
LAKE BUTLER FL 32054

55054182



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

82-0577152?

Applied For

Not Applicable

Zip

Country

Zip

Country

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

MULBERRY, TIMOTHY E SR
RT 2, BOX 441-C1
LAKE BUTLER FL 32054

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

Timothy E. Mulberry Sr. "The Full Gospel Church of Jesus Christ"
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 ☐ Delete
NAME MULBERRY, TIMOTHY E SR
STREET ADDRESS RT 2, BOX 441-C1
CITY-ST-ZIP LAKE BUTLER FL 32054

TITLE ☐ Delete
NAME DOPSON, JOHN W
STREET ADDRESS RT 4, BOX 2483
CITY-ST-ZIP MADISON FL 32340

TITLE ☐ Delete
NAME MULBERRY, SANDRA A
STREET ADDRESS RT 2, BOX 441-C1
CITY-ST-ZIP LAKE BUTLER FL 32054

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 JACKSON, SAMUEL A
STREET ADDRESS 802 SE 5TH AVE
CITY-ST-ZIP LAKE BUTLER FL 32054

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

Timothy E. Mulberry Sr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (4/03)