

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N06735

FILED  
Apr 05, 2002 8:00 AM  
Secretary of State

**Entity Name:** THE NEWBORN PENTECOSTAL CHURCH, INC.

**Current Principal Place of Business:**

3122 SR 574  
PLANT CITY, FL 33567

**New Principal Place of Business:**

**Current Mailing Address:**

3122 SR 574  
PLANT CITY, FL 33567

**New Mailing Address:**

**FEI Number:** 31-1085113

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SMITH, HOMER  
3122 SR 574  
PLANT CITY, FL 33567

**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: DP ( ) Delete  
Name: SMITH, HOMER,  
Address: 3122 SR 574  
City-St-Zip: PLANT CITY, FL 33567

Title: D ( ) Delete  
Name: LOCKARD, MARY,  
Address: 1310 W RISK ST  
City-St-Zip: PLANT CITY, FL 33567

Title: DVS ( ) Delete  
Name: SMITH, CAROLYN S.,  
Address: 3122 SR 574  
City-St-Zip: PLANT CITY, FL 33567

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: CAROLYN SMITH

DVS

04/05/2002

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date