2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # N15765 Apr 18, 2000 8:00 am Secretary of State 1. Entity Name ADOPTION CHURCH OF JESUS CHRIST, INC. 04-18-2000 90231 005 ****61.25 Mailing Address Principal Place of Business 4057 46TH ST. ANST ARTH ST VERO BEACH FL 32967-1150 VERO BEACH FL 32967 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 65-0039131 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent. Name Street Address (P.O. Box Number is Not Acceptable) PETERSON, WILLIAM L. 4057 46TH ST. VERO BEACH FL 32967 Zip Code City 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 SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition ☐ Delete TITLE TITLE PETERSON, WILLIAM L. NAME NAME STREET ADDRESS 4057 46TH ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP vero beach fl ☐ Change ☐ Addition ☐ Delete TITLE WHITFIELD, SELTON NAME 8375 63RD CT. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF WABASSO FL TITLE ☐ Delete TITLE Change ☐ Addition NAME TULLIS, LARRY NAME STREET ADDRESS 2801 DUNBAR ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. PIERCE FL ☐ Delete ☐ Change ☐ Addition TITLE PETERSON, DEVERLY NAME NAME STREET ADDRESS STREET ADDRESS 4057 46TH STREET CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL ☐ Delete TITLE Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Delete TIT) F Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.