2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N16821

Entity Name: SUWANNEE RIVER ASSEMBLY OF GOD, INC.

FILED Apr 16, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: C/O VINCENT S SPENCER C/O VINCENT S SPENCER 26471 STATE ROAD 247PO BOX 207 26471 STATE ROAD 247 PO BOX 207 BRANFORD, FL 32008 BRANFORD, FL 32008 US **Current Mailing Address:** New Mailing Address: C/O VINCENT S SPENCER C/O VINCENT S SPENCER 26471 STATE ROAD 247 PO BOX 207 26471 STATE ROAD 247PO BOX 207 BRANFORD, FL 32008 US BRANFORD, FL 32008 US FEI Number: 59-2240730 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPENCER, VINCENT 7756 264TH ST BRANFORD, FL 32008 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SPENCER, VINCENT Name: Name: 7756 264TH ST., GOVERNOR ST. Address: Address: City-St-Zip: BRANFORD, FL 32008 City-St-Zip: Title: Title: () Delete () Change () Addition LEE, WILLIAM J Name: Name: Address: 20620 US 129 Address: City-St-Zip: OBRIEN, FL 32071 City-St-Zip: Title: () Delete Title: (X) Change () Addition VOUGHT, RUSS Name: METZGAR, WILLIAM D Name: 6754 COUNTY ROAD 248 20425 33RD. DRIVE Address: Address: City-St-Zip: O'BRIEN, FL 32071 City-St-Zip: WELLBORN, FL 32094 Title: () Delete Title: (X) Change () Addition STANLEY, THEODORE R Name: LEE, MELVIN C., Name: Address: 8762 252ND ST Address: P.O. BOX 64 City-St-Zip: O'BRIEN, FL City-St-Zip: BRANFORD, FL 32008 Title: () Delete Title: () Change () Addition MCKENZIE, RANDY Name: Name: 20809 CR 137 Address: Address: City-St-Zip: LAKE CITY, FL 32024 City-St-Zip: Title: () Delete Title: () Change (X) Addition WALKER, PAMELA L Name: Name: Address: Address: RT. 4, BOX 52 BRANFORD, FL 32008 City-St-Zip: 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: PAMELA L. WALKER D 04/16/2002