

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N17813
1. Entity Name
Chipola Community Church, Inc.

FILED
Jun 28, 2000 8:00 am
Secretary of State

06-28-2000 90040 001 ****61.25
06-28-2000 90040 002 ****8.75

Principal Place of Business Mailing Address
JIM GODWIN RD. RT 2 BOX 214
ALThA, FL. ALThA, FL.
32421

17946

2. Principal Place of Business 3. Mailing Address
JIM GODWIN RD. RT 2 BOX 214
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State
ALThA, FL ALThA, FL.
Zip Country Zip Country
32421 CALHOUN 32421 CALHOUN

4. FEI Number Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
LUCILLE GODWIN
RT 2 BOX 214
ALThA, FL 32421

7. Name and Address of New Registered Agent
Name SAME AS 6.
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.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
LUCILLE GODWIN P/S/T RT 2 BOX 214 ALThA, FL 32421
JOHNNY GODWIN RT 2 BOX ALThA, FL 32421
HUBERT MALOY C RT 2 BOX 48 ALThA, FL 32421

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP
SAME
SAME
R. L. PHILLIPS C P.O. BOX 104 ALThA, FL 32421

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: Lucille Godwin 6-15-00 (850) 674-2422
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)

ATTACHMENT
DOC # N17813
17946

Chipola Community Church
Rt. 2 Box 214
Altha, Fl. 32421

Florida Department of State
Division of Corporations

Here is a check #1157 for filing our
Annual report, 61.25

Also a ck #875^{ck # 1158} for a certificate.

Everything on last year is the same.

I did not receive my Annual Report package
so I called (850) 487-6056^{ex} and asked for one.

~~So far I haven't received it.~~

This is all I know to do to get the
money to you before the dead line.

Thank you

Lucile Godwin (D)

Rt 2 Box 214

ph # (850) 674-2422

Altha, Fl. 32421

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