

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N20156

1. Entity Name

THE FULL GOSPEL PRAISE CHURCH, INCORPORATED

FILED
Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90075 004 ****61.25

Principal Place of Business

Mailing Address

1310 ANDREW ST.
INVERNESS FL 34452
US

P.O. BOX 640721
BEVERLY HILLS FL 34464-0721

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1310 Andrew St.

P.O. Box 640721

City & State

City & State

Inverness, FL.

Beverly Hills, FL.

Zip

Country

Zip

Country

34452

USA

34464-0721

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PERRY, SHARON L
1314 ANDREW ST
INVERNESS FL 34453

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/20/2000

DATE

FILE NOW:
FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DTS
BELLE WATSON, JESSIE
P.O. BOX 278
GEORGETOWN TN 37312 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DVP
KEMPER, JULIE LYNN
ROUTE 4 BOX 238
DECATUR TN 37322 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DP
KEMPER, SR., JOSEPH A
ROUTE 4 BOX 238
DECATUR TN 37322 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
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CITY - ST - ZIP
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☐ Delete

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph A. Kemper, Sr.

2/20/2000 423-334-2740

Date

Daytime Phone #

CR2E037 (9/99)