2001 UNIFORM BUSINESS REPORT (UBR) FILED May 15, 2001 08:00 AM N21589 DOCUMENT # 1. Entity Name **Secretary of State** HOLY TEMPLE #2 CHURCH OF CHRIST UPON THE ROCK OF THE A POSTOLIC FAITH, INC. Principal Place of Business Mailing Address 806 N.W. 18TH. STREET 1800 N.W. 9TH AVE. FORT LAUDERDALE FT. LAUDERDALE FL 33311 IIS 33311 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0002997 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JOHNSON ERNEST BISHOP JOHNSON, ERNEST ELDER Street Address (P.O. Box Number is Not Acceptable) 4470 NW 65 AVE 2898 NW 9TH AVENUE FT. LAUDERDALE FL33319 US City Zip Code FT. LAUDERDALE 33311 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. **BISHOP ERNEST JOHNSON** 05/15/2001 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE SD Delete TITLE ☐ Change ☐ Addition NAME NAME RAYMOND.CYNTHIA STREET ADDRESS STREET ADDRESS 1506 N.W. 18TH, COURT CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE 33311 TITLE ☐ Delete TITLE X Change ☐ Addition NAME JOHNSON, ERNEST ELDER NAME JOHNSON, ERNEST BISHOR STREET ADDRESS STREET ADDRESS 2898 NW 9TH AVENUE 4470 N.W. 65TH, AVENUE CITY-ST-ZIP FT. LAUDERDALE FL. 33319 CITY-ST-ZIP FT. LAHDERDALE FL. 33311 TITLE Delete TITLE Change ☐ Addition NAME MURCHISON, ERNEST NAME STREET ADDRESS STREET ADDRESS 865 N.W. 97TH. AVENUE CITY-ST-ZIP PLANTATION CITY-ST-ZIP FL. 33324 TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE Change Addition NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: _

STREET ADDRESS

CITY-ST-ZIP

BISHOP ERNEST JOHNSON

PD

05/15/2001

CR2E037 (11/00)