## **FILED**

## Jan 29, 2001 8:00 am Secretary of State

01-29-2001 90032 030 \*\*\*\*61.25

## **2001 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N22535

1. Entity Name

ASSEMBLY OF GOD KOREAN CHURCH OF LAKELAND, INC.

Principal Place of Business

Mailing Address

1333 E. MAIN Lakeland Fi Us		1333 E. MAIN STREET LAKELAND FL 33801 US				-		
2 Principal F	Place of Business	3 Mailing Address						
2. Principal Flace of Business		3. Mailing Address			878   1015   1881   81180   1181   811   8101   8 			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FEI Numbe	59-2838358		pplied For	
Zip	Country	Zip ·	Country	5. Certificate	of Status Desired	\$8.75 Ad	ditional	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
			Name					
MORGAN, HUS SUN HWA			Street Address (P.O. Box Number is Not Acceptable)					
	TERVIEW BLVD		-					
LAKELAN	ID FL 33811		City			Zip Cod	ما	
^ The observe	e named entity submits this statement for			<del></del>	FL			
SIGNATURE Aut Signature, typed or printed name of registered agent end title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE								
	FILE NOW: FEE IS \$61.25	9. Election Campaign F Trust Fund Contribut		\$5.00 May Be Added to Fees	Make Check Departmen		•	
10.	OFFICERS AND DIR	· · · · · · · · · · · · · · · · · · ·	11.	ADDITIONS/CHA	NGES TO OFFICERS AND D	RECTORS IN	l 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MCDOWELL, GLORIA S 6402 SHADOWBROOK LN LAKELAND FL 33813	☐ Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP			Change	☐ Addition	
TITLE	<b>#</b> D	☐ Delete	TITLE			☐ Change	Addition	
NAME	MORGAN, HWA SUN		NAME			_		
STREET ADDRESS CITY-ST-ZIP	1244 WATERVIEW BLVD		STREET ADDRESS CITY-ST-ZIP	يهيع مديهما والراء الأخيا			~ <u>~</u>	
TITLE	<b>*</b> T	☐ Delete	TITLE	, ==		☐ Change	Addition	
NAME	SINGLETARY, YOUNG	—· · · · · · · · ·	NAME			<b>—</b> *		
STREET ADDRESS CITY-ST-ZIP	360 24TH STREET APT 1160 WINTER HAVEN FL 33880		STREET ADDRESS CITY-ST-ZIP					
TITLE	WHITEH INTLITE COOCU	☐ Delete	TITLE		<u> </u>	☐ Change	☐ Addition	
NAME		<u> </u>	NAME			□ Guange	☐ Muulion	
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STREET ADDRESS	,		STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP	•				
TITLE NAME		☐ Delete	TITLE			☐ Change	☐ Addition	
STREET ADDRESS			NAME 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.

**SIGNATURE:** 

Daytime Phone #