2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N22535

1. Entity Name

ASSEMBLY OF GOD KOREAN CHURCH OF LAKELAND, INC.

		V=10							
Principal Place of Business Mailing Address									
1333 E. MAIN STREET LAKELAND FL 33801 US		1333 E. MAIN STREET LAKELAND FL 33801 US							
2. Principal	Place of Business	3. Mailing Address							
ar i imoipai	Tidos de Eddinicas	o. Maning Address	. Maning Address		{				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FEI Number 59-2838358			oplied For		
Zip Country		Zip	Zip Country		5. Certificate of Statu		8.75 Additional see Required		
	6. Name and Address of Current R	legistered Agent			7. Name and Addres	ss of New Registered	•		
The second secon				Name					
MORGAN, HWA SUN			ľ	Street Address (P.O. Box Number is Not Acceptable)					
	TERVIEW BLVD		-						
LAKELAND FL 33811				<u> </u>			T =	··	
₹				City		FI	Zip Cod	e	
SIGNATURE	Signature, typed or printed name of registered agent an After September 13, 2002,	d title if applicable. (NOTE: 9. Election Camp			uired when reinstating) \$5.00 May Be	DATE	:k Pavable		
	min. will be \$236.25.	Trust Fund Co	entributio	n. 🗌	Added to Fees		ent of State		
10.	OFFICERS AND DIRECTORS 11.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCDOWELL, GLORIA S 6402 SHADOWBROOK LN LAKELAND FL 33813	☐ Delete	NAME STREET CITY-S	T ADDRESS ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORGAN, HWA SUN 1244 WATERVIEW BLVD LAKELAND FL	☐ Delete	TITLE NAME STREET CITY-S	ADDRESS			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SINGLETARY, YOUNG 360 24TH STREET APT 1160 WINTER HAVEN FL 33880	Delete	TITLE NAME STREET CITY-S	ADDRESS IT-ZIP	ست پردهید		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET CITY-S	ADDRESS T-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET	ADDRESS		102.4.0	☐ 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.

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

☐ Delete

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

7.29.02

863.682.52428

☐ Change

Addition

FILED

Aug 06, 2002 8:00 am Secretary of State

08-06-2002 90278 040 ****61.25

Affachment # N20535 123410 I AM Sorry This Form is