

2001 UNIFORM BUSINESS REPORT (UBR)

Amended

DOCUMENT # N28246

1. Entity Name

Faith Memorial Church, INC.

Principal Place of Business

Mailing Address

FILED

01 JUL 11 AM 9:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

2817 Seminole Trail

Mailing Address

P.O. Box 492032

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Leesburg, FL

City & State

Leesburg, FL

4. FEI Number

59-2960633

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Poitier, David L.
100 S. Dixie Hwy.
Hollandale, FL 33009

Name
Constance P. Christian

Street Address (P.O. Box Number is Not Acceptable)

927 CR 468

City

Leesburg

FL

Zip Code

34748

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.

Reorganization of Corporate Structure

SIGNATURE

Constance P. Christian

Constance P. Christian, Director 7-2-01

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

(NOTE: Registered Agent signature required when reinstating)

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Poitier, David L.
100 S. Dixie Hwy.
Hollandale, FL 33009

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Christian, Constance P.
10941 Andrew St.
Leesburg, FL 34788

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Mosley, Gary
201 South Lake St.
Leesburg, FL 34748

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Kelly, Doretha P.
10941 Andrew St.
Leesburg, FL 34788

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Christian, Constance P.
927 CR 468
Leesburg, FL 34748

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
500004494225--3
-07/24/01--01093--014
*****70.00 *****70.00

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change

Addition

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:

Constance P. Christian

Date

7-2-01 (352)323-4823

Daytime Phone #

CR2E037 (11/00)