

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 26, 2001 8:00 am**  
**Secretary of State**

07-26-2001 90002 014 \*\*\*\*61.25

**DOCUMENT # N36653**

1. Entity Name

**THE CHURCH OF GOD OF AUBURDALE, INC.**



Principal Place of Business <b>121 W. BRIDGES AVENUE AUBURDALE FL 33823 US</b>	Mailing Address <b>322 N 20TH ST HAINES CITY FL 33844-4630 US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number	<b>NOT APPLICABLE</b>	Applied For	<input type="checkbox"/>
		Not Applicable	<input type="checkbox"/>
5. Certificate of Status Desired		<input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>FORTIN, ROBERT A                  322 NORTH 20TH STREET                  HAINES CITY FL 33844</b>		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		<b>FL</b>	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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW: FEE IS \$61.25</b> <b>After September 12, 2001, min. will be \$236.25</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	<b>Make Check Payable to Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
T FORTIN, CHERYL A 322 NORTH 20TH STREET HAINES CITY FL 33844	<input type="checkbox"/> Delete	D Leslie C. McDowell, Jr. 1315 MOSS AVE Haines City FL 33844	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D GASKINS, ROY 1219 E. CAMINO ROAD LAKELAND FL 33805	<input checked="" type="checkbox"/> Delete	D Charles Anderson 9620 Costine Meadows Dr Lakeland FL 33809	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D SUTTON, CAROL 107 NELSON ST AUBURDALE FL 33823	<input checked="" type="checkbox"/> Delete	D Tommy Deeson 9526 Costine Meadows Dr. Lakeland FL 33809	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D CURRAN, HELEN 601 HOPE RD AUBURDALE FL 33823	<input checked="" type="checkbox"/> Delete	D Jerry Smith 820 Braddock Rd. Auburndale FL 33823	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Cheryl A Fortin* **RECHERYL A. FORTIN** 7-23-2001 (863)422-2936

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CR2E037 (5/01)