

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 27, 2002 8:00 am**  
**Secretary of State**

05-27-2002 90448 045 \*\*\*\*61.25

DOCUMENT # N36653  
1. Entity Name The Church of God of Auburndale, INC

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business 121 W Bridgers Ave  
Suite, Apt. #, etc.

3. Mailing Address SAME  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State Auburndale FL  
Zip 33823 Country USA

City & State  
Zip Country

4. FEI Number Applied For  Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent  
Name Billy Ready, Esq.  
Street Address (P.O. Box Number is Not Acceptable) 209 Palmetto  
City Auburndale FL Zip Code 33823

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 \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

**FEE IS \$61.25**  
**Initial or Amended UBR**

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	<u>President</u> <u>JERRY W Hayes</u> <u>121 W Bridgers Ave</u> <u>Auburndale FL 33823</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Board member - D</u> <u>JERRY Smith</u> <u>820 Braddock Rd</u> <u>Auburndale FL 33823</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Board member - D</u> <u>Tommy Deeson</u> <u>4526 Costine Meadows Dr</u> <u>LAKELAND FL 33809</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Board member - Secretary</u> <u>Shelby Hayes</u> <u>121 W Bridgers Ave</u> <u>Auburndale, FL 33823</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Board member - Treasurer</u> <u>Carol Sutton</u> <u>107 Nelson Street</u> <u>Auburndale FL 33823</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Boardmember - D</u> <u>Charles Anderson</u> <u>9620 Costine Meadows Drive</u> <u>LAKELAND FL 33809</u>

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Shelby J Hayes Shelby J. Hayes 4/28/02 (863)968-9681

CR2E037B (12/01)