

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N36858

1. Entity Name

CRYSTAL SPRINGS FIRST ASSEMBLY OF GOD, INC.

FILED

Mar 28, 2001 8:00 am
Secretary of State

03-28-2001 90214 010 ****70.00

Principal Place of Business

2155 HWY. 39 S.
CRYSTAL SPRINGS FL 33524
US

Mailing Address

P.O. BOX 520
CRYSTAL SPRINGS FL 33524

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2870515

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

STRICKLAND, JOHNNY M. R
403 EUCLID AVE.
SEFFNER FL 33584

Name

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

City

FL

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME STRICKLAND, JOHNNY M. R
STREET ADDRESS 403 EUCLID AVE.
CITY-ST-ZIP SEFFNER FL 33584

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☒ Delete
NAME MATHEWS, CHARLES
STREET ADDRESS 41152 SUTORUS RD
CITY-ST-ZIP CRYSTAL SPRINGS FL

TITLE ☐ Change ☐ Addition
NAME Jeery money
STREET ADDRESS 2708 Keen Campbell Rd.
CITY-ST-ZIP Plant City, FL 33565

TITLE TD ☒ Delete
NAME LAW, SEELY T
STREET ADDRESS 2412 OAK DALE ST
CITY-ST-ZIP SEFFNER FL 33584

TITLE ☐ Change ☐ Addition
NAME Raymond Bodiford
STREET ADDRESS 667 Chancey Rd.
CITY-ST-ZIP Zephyrhills, FL 33540

TITLE D ☒ Delete
NAME HECKER, CHARLES
STREET ADDRESS 4136 COURT ST.
CITY-ST-ZIP ZEPHYRHILLS FL

TITLE ☐ Change ☐ Addition
NAME T Mason Wright
STREET ADDRESS 612 W. Keyville
CITY-ST-ZIP Plant City, FL 33567

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-25-01 788-1612 813

CR2E037 (10/00)