

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2003 8:00 am
Secretary of State

09-12-2003 90100 002 ****70.00

014055

DOCUMENT # N38054

1. Entity Name

HAVEN SEVENTH DAY CHURCH OF GOD MINISTRIES, INC.



Principal Place of Business

**2000 LEISURE DR., N.W.
WINTER HAVEN FL 33881**

Mailing Address

**2000 LEISURE DR., N.W.
WINTER HAVEN FL 33881**

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 **59-3018886**

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**OLSON, WILFRED H.
2000 LEISURE DR., NW
WINTER HAVEN FL 33881**

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. I am familiar with, and accept the obligations of registered agent.

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
After September 10, 2003, min will be \$236.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Delete
NAME **OLSON, WILFRED H.**
STREET ADDRESS **2000 LEISURE DR., NW**
CITY-ST-ZIP **WINTER HAVEN FL 33881**

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

TITLE **DT** ☐ Delete
NAME **OLSON, LEONA V.**
STREET ADDRESS **2000 LEISURE DR., NW**
CITY-ST-ZIP **WINTER HAVEN FL**

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

TITLE **D** ☐ Delete
NAME **KENT, ROY W.**
STREET ADDRESS **15955 HICKORY CORNERS RD**
CITY-ST-ZIP **HICKORY CORNERS MI 49060**

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

TITLE **VSD** ☐ Delete
NAME **ROUSEY, DEBRA**
STREET ADDRESS **2005 LEISURE DR NW (2000)**
CITY-ST-ZIP **WINTER HAVEN FL**

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

TITLE **D** ☐ Delete
NAME **STROUPE, L. JAMES**
STREET ADDRESS **1510 ROBINSON DR**
CITY-ST-ZIP **HAINES CITY FL**

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: **WILFRED H. OLSON** **SEP 15 2003**

CR2E037 (4/03)

Attachment

80147749
#N38054

2000 Leisure Rd NW
Winter Haven, Fla. 33881
Sept 5, 2003

Florida Dept. of State
Tallahassee Fla.

32314

Dear Sirs,

Relative to Document # N38054
of 2000 Leisure Rd. n.w. Winter Haven
Fla. Can say we have not bought or
sold any Real Estate in the year.

However, we did buy a computer and tape
machine and office supplies.

Please send us two cards to show we
are tax exempt for the local ~~tax~~ ^{tax} amount
the sale tax.

Enclosed is our check to cover this expense

Free of \$ 6⁰⁰ 25

Certificate of sale \$ 8.75

Total enclosed \$ 70.00

Sincerely
Pastor: Welford H. Olson