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

DOCUMENT # N42296

1. Entity Name

MCKEE LAKE ALLIANCE CHURCH OF THE CHRISTIAN AND MISSIONARY ALLIANCE, INC.



FILED Feb 21, 2003 8:00 am Secretary of State

02-21-2003 90257 023 ****61.25

						OD WE THE						
5972 62ND AVE. NORTH 597				Mailing Address 1972 62ND AVE. NORTH PINELLAS PARK FL 34665			Mark traffic or to					
2. Principal Place of Business 3. M				Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES					
City & State				ity & State		4. FEI Number 59-2		59-2392404	2392404		Applied For Not Applicable	
Zip Country				Zip Country			5. Certificate of	5. Certificate of Status Desired \$8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent							7. Name and Ad	idress of New Re	gistered A	gent		1
•		يساهون وميمني والواحديث	2		, N	ame	german in the contract of		:	ء بسوهد		1
COLPITTS, WILLIAM 9790 66TH STREET N #274					Si	Street Address (P.O. Box Number is Not Acceptable)						-
PINELLA	S PARK FL 33	3782				ity				T 7:- 0]
						ity			FL	Zip Cod	ie	
8. The above	e named entity s	submits this statement fo	or the purp	oose of changing its	registered of	fice or register	red agent, or both, i	n the State of Flori	da. I am fa	amiliar with,	and accept	1
the obliga	tions of register	ed agent.				_						
										•		
SIGNATURE			4.04.14									
	Signature, typed or	printed name of registered agent	and title if ap	plicable. (NOTE	:: Registered Agei	nt signature required	d 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 Florida Department of State					
10.	OFFICERS AND DIRECTORS			3	11. A			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE	T			☐ Delete TITL						☐ Change	☐ Addition	3
NAME	WILLIAM CO	LPITTS			NAME					_ •		100
STREET ADDRESS	9790 66TH S				STREET AD	DRESS						2
CITY-ST-ZIP	PINELLAS P	ARK FL 33782			CITY-ST-Z	IP]) E
TITLE	T			☐ Delete	TITLE		···			☐ Change	☐ Addition	ğ
NAME	MYERS, WIL				NAME							10
STREET ADDRESS	9790 66TH S				STREET ADI							
CITY-ST-ZIP	 	ARK FL 33782			CITY-ST-Z							
TITLE	T	200		☐ Delete	TITLE	ন (∵ুক্তে	æ. ·; ₹	~ 	,	Change	☐ Addition	
NAME	BRADSHAW,				NAME							
STREET ADDRESS	2226 HORAI				STREET ADD							
CITY-ST-ZIP	SAINT PETE	RSBURG FL 33707			CITY-ST-Z	Р						
TITLE				☐ Delete	TITLE					☐ Change	☐ Addition	
NAME STREET ADDRESS					NAME	,nean						
CITY-ST-ZIP					STREET ADE							
	·					·						ł
TITLE				☐ Delete	TITLE					☐ Change	Addition	
NAME STREET ADDRESS					NAME STREET ADD	npree						
CITY-ST-ZIP					CITY-ST-ZE	l l					1 100	ĺ
TITLE				☐ Delete	TITLE		*****	 .		☐ Change	Addition	-
NAME				- 031616	NAME				•	Onange	L. Addition	
STREET ADDRESS	1				STREET ADD	RESS						
CITY-ST-ZIP					CITY-ST-ZI	P						

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:

WESTURE RESULTEDATION

2/13/2003