

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 14, 2001 8:00 am
Secretary of State

08-14-2001 90009 023 ****61.25

DOCUMENT # N44593

1. Entity Name

GOOD SHEPHERD ASSEMBLY CHURCH OF GOD OF THE APOS

Principal Place of Business

2272 22ND ST
 SARASOTA FL 34234
 US

Mailing Address

P.O. BOX ~~0000~~ 48302
 SARASOTA FL ~~34230~~ 34230
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2272 22ND ST.

Suite, Apt. #, etc.

3. Mailing Address

SARASOTA

Suite, Apt. #, etc.

SARASOTA, FLA

City & State

SARASOTA

City & State

34230 SARASOTA

4. FEI Number

65-0298219

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WOODSIDE, MARIA
 213 61ST STREET
 BRADENTON FL 34203

7. Name and Address of New Registered Agent

Name

ROSA LEE WALKER

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

1912 ORANGE AVE

SARASOTA

34230

City

SARASOTA

FL

Zip Code

34230

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

Rosa Lee Walker

8-9-2001

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

TITLE	DP	<input type="checkbox"/> Delete
NAME	HILL, BISHOP IVAN S	
STREET ADDRESS	911 57 AVE., PLACE EAST	
CITY-ST-ZIP	BRADENTON FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	HARRIS, JAMES L.	
STREET ADDRESS	717 12TH ST. EAST	
CITY-ST-ZIP	BRADENTON FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WOODSIDE, MARIA Q.S.	
STREET ADDRESS	313 61ST AVE. EAST	
CITY-ST-ZIP	BRADENTON FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	STEWART, JOHN H	
STREET ADDRESS	723 12TH STREET E	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE	D	<input type="checkbox"/> Delete
NAME	WALKER, ROSA L	
STREET ADDRESS	1912 ORANGE AVE.	
CITY-ST-ZIP	SARASOTA FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROSA LEE WALKER	
STREET ADDRESS	1912 ORANGE AVE NUR	
CITY-ST-ZIP	SARASOTA FLA 34230	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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]

8-9-2001

CR2E037 (10/00)