

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90409 029 ****61.25

DOCUMENT # N49126

1. Entity Name
CHURCH OF JESUS CHRIST PENTECOSTAL ASSEMBLIES OF

Principal Place of Business Mailing Address
1399 STATE STREET W **3931 TOWHEE LANE**
JACKSONVILLE FL 32204 **JACKSONVILLE FL 32207-6136**
US **US**

C0068222



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-3136535		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
FLETCHER, JOE L. 3931 TOWHEE LN JACKSONVILLE FL 32207-6136 <i>Joe L Fletcher</i>				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City		FL	

B. 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 *Joe L Fletcher* DATE **5-1-2001**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
T FLETCHER, WILLIAM 2103 NELSON AVE JACKSONVILLE FL 32254	<input type="checkbox"/> Delete	TITLE NAME FLETCHER, WILLIAM STREET ADDRESS 2103 NELSON AVE CITY-ST-ZIP JACKSONVILLE FL 32254	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TT FLETCHER, DOROTHY 3931 TOWHEE LN. JACKSONVILLE FL 32207	<input type="checkbox"/> Delete	TITLE NAME FLETCHER, DOROTHY STREET ADDRESS 3931 TOWHEE LN. CITY-ST-ZIP JACKSONVILLE FL 32207	<input type="checkbox"/> Change <input type="checkbox"/> Addition
T FLETCHER, BERNARD 3983 O'RIELY DR JACKSONVILLE FL	<input type="checkbox"/> Delete	TITLE NAME FLETCHER, BERNARD STREET ADDRESS 3983 O'RIELY DR CITY-ST-ZIP JACKSONVILLE FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition
P FLETCHER, JOE 3931 TOWHEE LN. JACKSONVILLE FL 32207	<input type="checkbox"/> Delete	TITLE NAME FLETCHER, JOE STREET ADDRESS 3931 TOWHEE LN. CITY-ST-ZIP JACKSONVILLE FL 32207	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Joe L Fletcher* DATE: **5-1-2001 (909) 398-7875**

CR2E037 (10/00)