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[ ] Addition

Addition

## 2003 NOT-FOR-PROFIT CORPORATION

## Sep 02, 2003 8:00 am **UNIFORM BUSINESS REPORT (UBR)** Secretary of State DOCUMENT # N93000004517 09-02-2003 90185 048 \*\*\*\*61.25 THE LORD'S CHURCH, INC. Principal Place of Business Mailing Address 2303 48TH AVE W 2303 48TH AVE W **BRADENTON FL 34207** BRADENTON FL 34207 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FE! Number 65-0442955 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TAYLOR, RICHARD L Street Address (P.O. Box Number is Not Acceptable) 2303 48TH AVE W **BRADENTON FL 34207** Zip Code City 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be After September 10, 2003, min will be \$236.25 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. D/P ☐ Addition TITLE ☐ Delete TITLE ☐ Change TAYLOR, RICHARD L NAME NAME STREET ADDRESS STREET ADDRESS 2303 48TH AVE. W CITY-ST-ZIP CITY-ST-7IP **BRADENTON FL 34207** Delete TITLE ☐ Change ☐ Addition TITLE TAYLOR, ADRIENNE STREET ADDRESS 2303 48TH AVE. W STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34207** \_\_\_ Change TITLE Delete Addition TITLE TAYLOR, JENNIFER NAME NAME STREET ADDRESS STREET ADDRESS 2303 48TH AVE W CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** TITLE ☐ Delete TITLE Change 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

NAME

TITLE

NAME STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

NAME

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CITY-ST-ZIP

CITY-ST-ZIP TITLE

CITY-ST-ZIP

Estichard L. Taylor