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

FILED
Apr 09, 2003 8:00 am
Secretary of State
04-09-2003 90194 007 ****70.00

DOCUMENT # N93000004724

1. Entity Name
DEEPER LIFE FELLOWSHIP FULL GOSPEL, INC.

Principal Place of Business	Mailing Address
2400 FIRST LANE NE BLDG 6 APT 114 BOYNTON BEACH FL 33435 US	2400 FIRST LANE NE BLDG 6 APT 114 BOYNTON BEACH FL 33435 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
2400 N.E. first Lane, BLDG 6	2400 N. E. first Lance BLDG 6
Suite, Apt. #, etc.: APT. 114	Suite, Apt. #, etc.: APT. 114
City & State: Boynton Beach	City & State: Boynton Beach
Zip: 33435 Country: Florida	Zip: 33435 Country: Florida

4. FEI Number 65-0445312 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HEDRINGTON, CLARENCE
2400 FIRST LANE NE
BLDG 6 APT 114
BOYNTON BEACH FL 33435

7. Name and Address of New Registered Agent

Name: Clarence Hedrington
Street Address (P.O. Box Number is Not Acceptable): 2400 N.E. first Lanee, BLdg. 6 Apt 114 Boynton Beach
City: FL FL Zip Code: 33435

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: Clarence Hedrington March 31-03 (561-732-9071
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 Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ELLISON, BALFORD 117 SOUTH ATLANTIC DR WEST BOYNTON BEACH FL 33435	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Ellison, Balford 117 South Atlantic Drive Boynton Bch, fl 33435	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T KIRKLAND, CHARLENE 5895 FAIRGREEN RD W PALM BCH FL 33417	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Kirkland, Charlene 5895 fair Green Rd. W. Palm Bch, fl 33460	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PT HEDRINGTON, CLARENCE 2400 FIRST LANE NE BLDG 6 APT 114 BOYNTON BEACH FL 33435	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Hedrington, Clarence 2400 n. E. first Lane Bld 6 apt 114 Boynton Bch, fl 33435	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HEDRINGTON, EMMA 2400 NE FIRST LANE BLDG 6 APT 114 BOYNTON BEACH FL 33435	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Hedrington, Emma 2400 n.E. Lane Bld 6 apt 114 Boynton Bch, fl 33435	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

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: Clarence Hedrington CLARENCE HEDRINGTON President March 31-03 561-732-9071