

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

FILED
May 08, 2003 8:00 am
Secretary of State

05-08-2003 90154 045 ****61.25

0055442

DOCUMENT # N94000000831

1. Entity Name

NEW HORIZEIN CHURCH OF GOD IN CHRIST INC.



Principal Place of Business

**NEW HORIZEIN COGIC
804 22ND AVE WEST
BRADENTON FL 34205
US**

Mailing Address

**NEW HORIZEIN COGIC
804 22ND AVE WEST
BRADENTON FL 34205
US**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

NEW HORIZEIN C.O.G.I.C

3. Mailing Address

NEW HORIZEIN C.O.G.I.C

Suite, Apt. #, etc.

804 22nd Ave West

Suite, Apt. #, etc.

804 22nd Ave West

City & State

Bradenton Florida

City & State

Bradenton Florida

Zip

34205

Country

Florida USA

Zip

34205

Country

Florida USA

4. FEI Number **65-0353911**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SCAVELLA, DAVID ELDER
6309 8TH CT EAST
BRADENTON FL 34203**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Elder David Scavella

5/5/03

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

TITLE **DP** ☐ Delete
NAME **SCAVELLA, DAVID ELDER**
STREET ADDRESS **6309 8TH CT EAST**
CITY-ST-ZIP **BRADENTON FL 34203**

TITLE **D** ☐ Delete
NAME **SCAVELLA, LARVERN**
STREET ADDRESS **6309 8TH CT EAST**
CITY-ST-ZIP **BRADENTON FL 34203**

TITLE **D** ☐ Delete
NAME **WOODS, VALARY**
STREET ADDRESS **415 60TH AVE. E**
CITY-ST-ZIP **BRADENTON FL 34203**

TITLE **D** ☐ Delete
NAME **WILLIAMS, GWENDOLYN**
STREET ADDRESS **5310 CARMEN AVE.**
CITY-ST-ZIP **SARASOTA FL 34235**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ 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 REQUIRED Elder David Scavella 5/5/03 941-7506709

CR2E037 (10/02)