UNIFORM BUSINESS REPORT (UBR)

2003 NOT-FOR-PROFIT CORPORATION DOCUMENT # N9400001682

THE HIGHWAY APOSTLE FAITH CHURCH OF JESUS CHRIST

FILED Jan 29, 2003 8:00 am Secretary of State

01-29-2003 90185 020 ****61.25

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, INC.			1.00	IIS					
Principal Place of Business 701 NORTH 13TH STREET FORT PIERCE FL US		Mailing Address 701 North 13Th 5th Fort-Pierce FC34900 US		 408(1) 01 014 4	(II 818 14 2017) 20 141 8 1	1 121 14 211 1110 2	16 070 0 11 0 1 7 0	1(a 1(a) 1 68 ;	
2. Principal Place of Business		3. Mailing Address 101th 13th Street							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES					
City & Stat	te	City & State Piero	e, FLOI	Mg	4. FEI Number 65	-0563403		_ 	plied For t Applicable
Zip	Country	34980	Country USA		5. Certificate of Sta	atus Desired		8.75 Add	
	6. Name and Address of Current	Registered Agent		- e -	7. Name and Add	ress of New Reg	jistered Age	ent	
1414147D	, n	· · _ 	Name	_		-			
WALKER	with 13th 5th FC34950		Street Ad	idress (F	P.O. Box Number is N	lot Acceptable)			
US of			City				FL	Zip Code	ə
	e named entity submits this statement for tions of registered agent.	r the purpose of changing its re	gistered office or r	registere	ed agent, or both, in	the State of Florid	da. I am fan	niliar with,	and accept
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: R	egistered Agent signatur	re required	when reinstating)		DATE		
	·								
FILE NOW: FEE IS \$61.25 9. Election Carr Trust Fund Co					\$5.00 May Be	Make	Check F		to
		Trust Fund Cor	tribution. L		Added to Fees		Departm	ent of S	State
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	PD WALKER, D.H. 701 North 13th St.	RECTORS Delete	11. TITLE	A A	Added to Fees DDITIONS/CHANGE	Florida S TO OFFICERS	AND DIREC		
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12. I hereby certify that the information supplied with this filling 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:

772-489-5543