

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

FILED
Apr 10, 2002 8:00 am
Secretary of State

04-10-2002 90034 003 ****70.00

DOCUMENT # N 9400003368

1. Entity Name
Healing FOR THE NATIONS Evangelistic
Association, Inc.

DO NOT WRITE IN THIS SPACE

B0061562

2. Principal Place of Business
WORLD HARVEST CHURCH
Suite, Apt. #, etc.
10777 Pembroke Rd.
City & State
Pembroke Pines, FL
Zip
33025
Country
USA

3. Mailing Address - Return Certificate
Neigel L. Scarborough
Suite, Apt. #, etc.
1561 Dick Pond Rd.
City & State
Myrtle Beach, SC
Zip
29575
Country
USA

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0508706
Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent
Name
Jack Humphrey
Street Address (P.O. Box Number is Not Acceptable)
5437 KING AVE.
Zellwood, FL
City
FL
Zip Code
32798

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.

SIGNATURE *Jack Humphrey* Jack Humphrey 4-5-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Neigel L. Scarborough 1561 Dick Pond Rd. Myrtle Beach, SC 29575	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/STB Peggy Scarborough 1561 Dick Pond Rd. Myrtle Beach, SC 29575	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sherri Scarborough 7819 Calibre Crossing, Apt. 104 Charlotte, NC 28227	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Thomas McCroskey 1544 FORT Hill Dr. Seneca, SC 29678	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Marcelle McCroskey 1544 FORT Hill Dr. Seneca, SC 29678	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE 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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Neigel L. Scarborough* - Neigel L. Scarborough 3-29-02
843-650-2407

CR2E037B (12/01)