

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90283 035 ****61.25

DOCUMENT # N95000000290

1. Entity Name

FULL GOSPEL BAPTIST CHURCH FELLOWSHIP OF FLORIDA, INC.

Principal Place of Business

Mailing Address

**1214 AVONDALE LANE
 WEST PALM BEACH FL 33409**

**1214 AVONDALE LANE
 WEST PALM BEACH FL 33409
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0575518

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**JOSEPH, KIM E
 1214 AVONDALE LANE
 WEST PALM BEACH FL 33409**

Name **Arlet Harris**

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

1214 Avondale Lane

City **West Palm Beach**

FL Zip Code **33409**

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

Arlet Harris

4/30/02

(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
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
 NAME **GRANGER, WALTER O BISHOP**
 STREET ADDRESS **1111 36TH ST**
 CITY-ST-ZIP **WPB FL 33409**

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

TITLE **D** ☐ Delete
 NAME **TRIPLETT, DEREK T BISHOP**
 STREET ADDRESS **869 DERBYSHIRE ROAD**
 CITY-ST-ZIP **HOLLY HILL FL 32117**

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

TITLE **D** ☐ Delete
 NAME **GORDON, JACQUELYN**
 STREET ADDRESS **1312 E UNIVERSITY BLVD**
 CITY-ST-ZIP **MELBOURNE FL 32901**

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

TITLE **D** ☒ Delete
 NAME **ARLET, HARRIS**
 STREET ADDRESS **1111 36TH STREET**
 CITY-ST-ZIP **WEST PALM BEACH FL 33407**

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

TITLE **D** ☒ Delete
 NAME **JOSEPH, KIM**
 STREET ADDRESS **1214 AVONDALE LANE**
 CITY-ST-ZIP **WEST PALM BEACH FL 33409**

TITLE **D** ☒ Change ☒ Addition
 NAME **Arlet Harris**
 STREET ADDRESS **1214 Avondale Lane**
 CITY-ST-ZIP **West Palm Beach, FL. 33409**

TITLE **D** ☐ Delete
 NAME **SYKES, MANUEL**
 STREET ADDRESS **1045 16TH STREET SOUTH**
 CITY-ST-ZIP **SAINT PETERSBURG FL 33705**

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:

Arlet Harris

4/30/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E037 (9/01)