

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000002543

1. Entity Name

THE HOLY CHURCH OF GOD REDEEM, INC.

FILED
Jul 21, 2000 8:00 am
Secretary of State

07-21-2000 90004 048 ****61.25

Principal Place of Business

810 W LLOYD ST
PENSACOLA FL 32501
US

Mailing Address

507 QUINTETTE ROAD
CANTONMENT FL 32533

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3288313

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

BONHAM, DOROTHY P
507 QUINTETTE ROAD
CANTONMENT FL 32533

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.

SIGNATURE

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
After September 13, 2000 min. will be \$236.25

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 PT
NAME BONHAM, DOROTHY P.
STREET ADDRESS 507 QUINTETTE ROAD
CITY-ST-ZIP CANTONMENT FL 32533 ☐ Delete

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

TITLE VT
NAME BONHAM, MAJOR JR.
STREET ADDRESS 507 QUINTETTE ROAD
CITY-ST-ZIP CANTONMENT FL 32533 ☐ Delete

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

TITLE SD
NAME BONHAM, BRENDA K.
STREET ADDRESS 7972 REGIMENT AVE.
CITY-ST-ZIP PENSACOLA FL 32514 ☐ Delete

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

TITLE DT
NAME BONHAM, RHONDA R.
STREET ADDRESS 7972 REGIMENT AVE.
CITY-ST-ZIP PENSACOLA FL 32514 ☐ Delete

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

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
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:

Dorothy P. Bonham (DOROTHY P. BONHAM)

Date

Daytime Phone #

7-17-2000 (850) 968-0789

CR2E037 (5/00)