1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000002619

1. Corporation Name

CHURCH OF GOD BY FAITH PENTECOSTAL HOLINESS, INC

Principal Place of Business
13014 GEORGIA AVE
ASTATULA FL 34705
US ·

Mailing Address

13014 GEORGIA AVE ASTATULA FL 34705 US

FILED Feb 01, 1999 8:00am Secretary of State

02-01-1999 90020 048 ****61.25

us ·		US .		I NORINIAN AND HAIRI BURNI BERNI BANKA BARKI BERNI ABRIKA BIRRA BIRRA NIBARA KERNI KABA				
\vdash	Principal Place of Business	2a. Mailing Address	S	 Date Incorporated or Qualifed 05/30/1995 				
21	Suite, Apt. #, etc.	Suite, Apt. #, et	tc.	4. FEI Number	Applied For			
22		27	····	59-3327809	Not Applicable			
23	City & State	City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
24	Zip Country 25	Zip 29	Country 30	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
	9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							

HOBSON, RANDY L 13014 GEOGIA AVE ASTATULA FL 34705

10. Name and Address of New Registered Agent									
81	Name								
82	Street Address (P.O. Box Number is Not Acceptable)								
83									
84	City 85 Zip Code								

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

agoni, Fairi tarimai wat, and accept the congarious of, decidit of 7.0000, Florida Statutes.											
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: R	enistered Agent signature	required when reinstating) DATE	i ii							
.12.	OFFICERS AND DIRECTORS	legistered Agent signature required when reinstating) DATE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12									
TITLE	D DELETE	1.1 TITLE		Change	Addition						
NAME	HOBSON, RANDY L	1.2 NAME		1 1							
STREET ADDRESS	13014 GEORGIE AVE	1.3 STREET ADDRESS	· 特殊等等。	•							
CITY-ST-ZIP	ASTATULA FL	1.4 CITY-ST-ZIP		' 1							
TITLE	D DELETE	2.1 TITLE	·	Change	Addition						
NAME	HOBSON, CORA	2.2 NAME									
STREET ADDRESS	13014 GEORGIA AVE	2.3 STREET ADDRESS									
CITY-ST-ZIP	ASTATULA FL	2. 4 CITY-ST-ZIP	·								
TITLE	D DELETE	3.1 TITLE		☐ Change	☐ Addition						
NAME (CSS) (A)	COLLINS, ANDREW J	3.2 NAME									
STREET ADDRESS	(25783 COUNTY RD 565-A	3.3 STREET ADDRESS									
CITY-ST-ZIP	CLERMONT FL 34711	3.4. CITY-ST-ZIP		•							
TITLE	D . DELETE	4.1 TITLE		Change	Addition						
NAME	BRASHER, MAITLAND C JR.	4. 2 NAME	The state of the s	· a meet a ris							
STREET ADDRESS	25201 MADISON ST	4.3 STREET ADDRESS		and the second							
CITY-ST-ZIP	ASTATULA FL 34705	4.4 CITY-ST-ZIP			1.11分割						
TITLE	D DELETE	5.1 TITLE	1.	Change	Addition						
NAME	BRASHER, CAROLYN A	5.2 NAME .									
STREET ADDRESS	25201 MADISON ST	5.3 STREET ADDRESS	•	į							
CITY-ST-ZIP	ASTATULA FL 34705	5.4 CITY-ST-ZIP		,1							
TITLE .	Solar Control of the	6.1 TRILE		☐ Change	☐ Addition						
NAME	70 mm	6.2 NAME									
STREET ADDRESS		6.3 STREET ADDRESS									
CITY-ST-ZIP		6.4 CITY-ST-ZIP									

4. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF PIGNING OFFICER OR DIRECTOR

1/14/99

(353)343-5246

32E037 (11/98)