2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 09, 2001 8:00 am
Secretary of State
03-09-2001 90487 033 ****61.25

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DOCUMENT # N96000000284

1. Entity Name

FAITH FELLOWSHIP CHURCH OF BREVARD, INC.

Principal Place of Business	Mailing Address
2820 BUSINESS CENTER BLVD MELBOURNE FL 32940	3125 WEST NEW HAVEN AVENUE. SUITE 200 WEST MELBOURNE FL 32904

A0030668

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	2820 BUSINESS CENTER BLVD Suite, Apt. #, etc.
City & State	City & State: MELBOURNE, FL
Zip / Country	Zip: 32940-7103 / Country: USA

4. FEI Number: 59-3332844 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, R. KEITH
3125 WEST NEW HAVEN AVENUE, SUITE 200
WEST MELBOURNE FL 32904

7. Name and Address of New Registered Agent

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	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KEITH WILLIAMS 3125 W NEW HAVEN AVE #200 W MELBOURNE FL 32904	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD REINHARDT, WAYNE 2161 WEATHERLY AVE W. MELBOURNE, FL 32904	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD ALLEN, JOHN 1707 PARKSIDE DR INDIAN HARBOR FL 32937	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WHITFIELD, LARRY 750 GLEN GARRY DR MELBOURNE, FL 32940	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HALL, STEVEN 3956 SPARROW HAWK RD MELBOURNE FL 32934	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD HALL, STEPHEN	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD WIEOERMULLER, BOB N 697 PALMER DR. MELBOURNE FL 32940	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD NIEDERMULLER, BOB	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: SIGNATURE REQUIRED STEPHEN H HALL, DIRECTOR MAR 07 2001 321-259-7200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #