2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 03, 2001 8:00 am Secretary of State DOCUMENT # N9600003518 ROSE OF SHARON PENTECOSTAL HOLINESS CHURCH, INC. 02-03-2001 90293 006 ****61.25 Principal Place of Business Mailing Address 1551 N.W. 27TH AVENUE 2530 SW 5TH ST 616686 FT. LAUDERDALE FL 33311 FT LAUDERDALE FL 33312 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0696524 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) WILSON, CARNAL 2530 S.W. 5TH STREET FT. LAUDERDALE FL 33312 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 9. Election Campaign Financing FILE NOW: Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Delete TITLE TITLE Change ☐ Addition NAME BAILEY, GRACE L NAME STREET ADDRESS 2820 N.W. 13TH ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL TITLE ☐ Delete TITLE Addition ☐ Change NAME WILSON, CARNAL NAME STREET ADDRESS 2530 S.W. 5TH STREET STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL CITY-ST-7IP TITLE Detete TITLE ☐ Change Addition COLE, JOY NAME NAME STREET ADDRESS 2655 N.E. 8TH AVENUE #1 STREET ADDRESS CITY-ST-ZIP FT. LAUDERADLE FL CITY-ST-ZIP TITLE TITLE Addition. Change WILLIAMS, T.C. NAME NAME STREET ADDRESS 2247 N.W. 59TH TERRACE STREET ADDRESS CITY-ST-ZIP LAUDERHILL FL 33313 CITY-ST-ZIP Delete TITLE TITLE Addition ☐ Change NAME NAME DEBORAH ERVIN 216 N.W. 15 LANE, #4 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Pt. LAUDERDALE, FL 39311 TITLE ☐ Delete ☐ Addition TIT! F ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

Daytime Phone #