

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 08, 2003 8:00 am**  
**Secretary of State**

09-08-2003 90144 011 \*\*\*\*\*61.25

**DOCUMENT # N96000003666**

1. Entity Name

**PERFECTED PRAISE AND WORSHIP CENTER INC.**



Principal Place of Business

**1856 MARTIN LUTHER KING  
SARASOTA FL 34234**

Mailing Address

**2037 - 28TH STREET  
SARASOTA FL 34234**

2. Principal Place of Business

*Perfected Praise worship at 2037 28th St*

3. Mailing Address

*1856*

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

*Sarasota Fla*

*Sarasota Fla*

Zip

Country

Zip

Country

*34234 Sarasota*

*34234*

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0890523**

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**LUMSDEN, JAMES B SR  
2037 28TH STREET  
SARASOTA FL 34234**

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. I am familiar with, and accept the obligations of registered agent.

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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

|                |                                 |                                 |
|----------------|---------------------------------|---------------------------------|
| TITLE          | PD                              | <input type="checkbox"/> Delete |
| NAME           | LUMSDEN, JAMES B SR             |                                 |
| STREET ADDRESS | 2037 28TH STREET                |                                 |
| CITY-ST-ZIP    | SARASOTA FL 34234               |                                 |
| TITLE          | VD                              | <input type="checkbox"/> Delete |
| NAME           | LUMSDEN, JAMES B JR             |                                 |
| STREET ADDRESS | 14590 SW 37 COURT               |                                 |
| CITY-ST-ZIP    | OCALA FL 34473                  |                                 |
| TITLE          | M                               | <input type="checkbox"/> Delete |
| NAME           | LUMSDEN, DARNELL L              |                                 |
| STREET ADDRESS | 808 59 AVENUE DRIVE WEST APT. A |                                 |
| CITY-ST-ZIP    | BRADENTON FL 34207              |                                 |
| TITLE          | DTS                             | <input type="checkbox"/> Delete |
| NAME           | LUMSDEN, ROSEMARY               |                                 |
| STREET ADDRESS | 2037 28 STREET                  |                                 |
| CITY-ST-ZIP    | SARASOTA FL 34234               |                                 |
| TITLE          |                                 | <input type="checkbox"/> Delete |
| NAME           |                                 |                                 |
| STREET ADDRESS |                                 |                                 |
| CITY-ST-ZIP    |                                 |                                 |
| TITLE          |                                 | <input type="checkbox"/> Delete |
| NAME           |                                 |                                 |
| STREET ADDRESS |                                 |                                 |
| CITY-ST-ZIP    |                                 |                                 |

|                |  |
|----------------|--|
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           |  |
| STREET ADDRESS |  |
| CITY-ST-ZIP    |  |
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           |  |
| STREET ADDRESS |  |
| CITY-ST-ZIP    |  |
| TITLE          | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           |  |
| STREET ADDRESS |  |
| CITY-ST-ZIP    |  |
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           |  |
| STREET ADDRESS |  |
| CITY-ST-ZIP    |  |
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> 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:

*James B Lumsden*

*9/3/03*

*941-360-9649*

CR2E037 (10/02)