## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000005386

FILED Apr 28, 2008 Secretary of State

Entity Name: FIRST UNITED PENTECOSTAL CHURCH INC. OF CHIPLEY, FLORIDA

Current Principal Place of Business: New Principal Place of Business:

1816 HIGHWAY 90 CHIPLEY, FL 32428

Current Mailing Address: New Mailing Address:

PO BOX 886 CHIPLEY, FL 32428

FEI Number: 59-3029193 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CAUDLE, JAMES G REV.

1816 HIGHWAY 90

CHIPLEY, FL 32428 US

WARD, RONALD A
1816 HIGHWAY 90

CHIPLEY, FL 32428 US

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: RONALD A. WARD 04/28/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD ( ) Delete Title: VD (X) Change ( ) Addition Name: CAUDLE, JAMES G REV Name: WARD, RONALD A

 Name:
 CAODEE, SAVIES G REV

 Address:
 1816 HIGHWAY 90

 City-St-Zip:
 CHIPLEY, FL 32428

 City-St-Zip:
 CHIPLEY, FL 32428

 Title:
 VD
 ( ) Delete
 Title:
 T
 (X) Change ( ) Addition

 Name:
 WARD, RONALD A
 Name:
 WARD, CELIA F

 Address:
 744 MAIN ST
 Address:
 744 MAIN ST

 City-St-Zip:
 CHIPLEY, FL 32428
 City-St-Zip:
 CHIPLEY, FL 32428

Title: T ( ) Delete Title: S (X) Change ( ) Addition

 Name:
 WARD, CELIA F
 Name:
 HINOTE, DEDE

 Address:
 774 MAIN ST
 Address:
 262 RUCKLE DRIVE

City-St-Zip: CHIPLEY, FL 32428 City-St-Zip: DEFUNIAK SPRINGS, FL 32443

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BROOKS, SHELEY GLEN
 Name:

 Address:
 1383 GRANT ROAD
 Address:

 City-St-Zip:
 PONCE DE LEON, FL 32455
 City-St-Zip:

Title: S (X) Delete Title: ( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CELIA F. WARD T 04/28/2008