

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000003242

1. Entity Name

IN HIS PRESENCE EVANGEL CHRISTIAN CHURCHES & MINISTRIES INCORPORATED

Principal Place of Business

VISTA BOWLING CENTER (MEETING ROOM)
2101 VISTA PARKWAY
WEST PALM BEACH FL 33411
US

Mailing Address

C/O REV. MARLENE GINGRICH
P.O. BOX 17394
WEST PALM BEACH FL 33416
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0763513

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GINGRICH, MARLENE C REV.
533 E. REDWOOD DRIVE
LAKE PARK FL 33403

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 PD
NAME GINGRICH, MARLENE C REV.
STREET ADDRESS 533 E. REDWOOD DRIVE
CITY-ST-ZIP LAKE PARK FL 33403 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VPD
NAME BROWN, BERNARD
STREET ADDRESS 533 E. REDWOOD DRIVE
CITY-ST-ZIP LAKE PARK FL 33403 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DT
NAME BROWN, SYLVIA
STREET ADDRESS 533 E. REDWOOD DRIVE
CITY-ST-ZIP LAKE PARK FL 33403 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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. Further, I 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 the signature of the 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rev. Marlene C. Gingrich (REV. MARLENE C. GINGRICH) 04/29/2002 561/818-2198

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90485 033 ****75.00



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)