2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2002 8:00 am
Secretary of State
01-16-2002 90264 013 ****61.25

0044656

DOCUMENT # N97000004327

1. Entity Name

TECHILAH CHADASHAH NEW BEGINNINGS, INC.

Principal Place of Business	Mailing Address
915 OAK LANE LAKELAND FL 33813 US	5118 DORMAN ROAD LAKELAND FL 33813

DO NOT WRITE IN THIS SPACE

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 59-3480114 ☐ 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
MCGILL, YVONNE 5118 DORMAN ROAD LAKELAND FL 33813	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 Yvonne McGill 1-7-02
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	ST MCGILL, LAUREN C 5118 DORMAN RD LAKELAND FL 33813	☐ Delete	DIRECTOR JAMES W. TIDMORE 212 KENT DRIVE ROCKY MOUNT N.C. 27804	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V HERMANN, THOMAS 6885 HAYTER DR LAKELAND FL 33813	☒ Delete	TAMMY TIDMORE 212 KENT DRIVE ROCKY MOUNT, NORTH CAROLINA 27804	☐ Change ☒ Addition DIRECTOR
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HERMANN, JUDITH 6885 HAYTER DR LAKELAND FL 33813	☒ Delete	V MCELWEE, MARK 954 OAK LANE LAKELAND, FL. 33813	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCELWEE, MARK 954 OAK LANE LAKELAND FL 33811	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCELWEE, CHRISTINE 954 OAK LAND LAKELAND FL 33811	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (9/01)

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: Lauren C McGill SIGNATURE REQUIRED LAUREN C. McGILL 1/7/02 (863)646-3358
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #