

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000005387

1. Entity Name

THE WORD OF GOD CHURCH OF THE PENTECOSTAL ASSEMBLY



Principal Place of Business

2226 W CENTRAL BLVD
ORLANDO FL 32805

Mailing Address

2226 W CENTRAL BLVD
ORLANDO FL 32805

2. Principal Place of Business

1733 Mercy Dr
Suite, Apt. #, etc.

3. Mailing Address

Same
Suite, Apt. #, etc.

City & State

Orlando, FL

City & State

Zip

32808

Country

USA

Zip

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NEWTON, BILLY G
2226 W CENTRAL BLVD
ORLANDO FL 32805

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.

SIGNATURE

Billy G. Newton
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

June 7, 2001

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

TITLE	P	☐ Delete
NAME	NEWTON, BILLY	
STREET ADDRESS	306 N DOLLINS AVE	
CITY-ST-ZIP	ORLANDO FL 32805	
TITLE	S	☐ Delete
NAME	PAUL, DELLA	
STREET ADDRESS	237 FANFARE AVE	
CITY-ST-ZIP	ORLANDO FL 32811	
TITLE	TR	☐ Delete
NAME	NEWTON, TOBE	
STREET ADDRESS	428 COTTAGE HILL RD	
CITY-ST-ZIP	ORLANDO FL 32805	
TITLE	TR	☐ Delete
NAME	HOWELL, EDWARD	
STREET ADDRESS	112 BANTRY DRIVE	
CITY-ST-ZIP	LAKE MARY FL 32746	
TITLE	TR	☐ Delete
NAME	PERSON, JOAN	
STREET ADDRESS	154 SIR TOPAZ LANE	
CITY-ST-ZIP	LAKE MARY FL 32846	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

Billy G. Newton