FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 11, 2002 8:00 am § Secretary of State DOCUMENT # **N97000005579** 1. Entity Name 04-11-2002 90676 017 ****70.00 NEW LIFE MISSIONARY BAPTIST CHURCH, THE CHURCH T HAT KEEPS GOD SMILING, INC. Principal Place of Business Mailing Address 2701 BROADWAY 2701 BROADWAY RIVIERA BEACH FL 33404 RIVIERA BEACH FL 33404 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For ~City-& State - -- City & State ---- --4.-FEI Number 65-0775594 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) WHITE, GLADYS D 1317 WEST 10TH STREET **RIVIERA BEACH FL 33404** Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME WHITE, GLADYS D STREET ADDRESS STREET ADDRESS 1317 WEST 10TH STREET CITY-ST-ZIP CITY-ST-ZIP RIVIERA BEACH FL 33404 TITLE IN COL TRASHTAL ☐ Delete TITLE ☐ Addition TR..... Vincert B. Easley EASEY, VINCENT B NAME STREET ADDRESS P.U Bux STREET ADDRESS 2531 CANTERBURY DR. S. CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33407 ☐ Delete TITLE ☐ Addition TITLE NAME EASLEY, JAMES B NAME STREET ADDRESS STREET ADDRESS 2631 AVE R UNIT B CITY-ST-ZIP CITY-ST-ZIP RIVIERA BEACH FL 33404 Delete TITLE NAME ENSKY, VINCENT NAME STREET ADDRESS 2521 CANTERBURY DR SOUTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33407 ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS Ecnÿäst-zir ∙lG£ CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12: Thereby certify that the information supplied with this filling 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 of supplemental report is true and accordance 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

SIGNATURE:

changed, or on an attachment with