2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # N9800001078 Jul 20, 2000 8:00 am Secrétary of State TRUE GOSPEL PENTECOSTAL CHURCH, INC. 04-17-2000 90051 023 ****75.00 Principal Place of Business Mailing Address 4327 W. COLUMBIA STR. C/O ELDER MOSES MONTGOMERY ORLANDO FL 32805 5437 KAREN CT ORLANDO FL 32811 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3515808 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) MONTGOMERY, MOSES REV. 5437 KAREN CT ORLANDO FL 32811 City 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. FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. After September 13, 2000 min. will be \$236.25 Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TP Delete ☐ Change TITLE ☐ Addition TITLE MONTGOMERY, MOSES REV. NAME NAME STREET ADDRESS STREET ADDRESS 5437 KAREN CT. CITY-ST-ZIP CITY-ST-7/P ORLANDO FL 32811 ☐ Delete ☐ Change ☐ Addition TITLE TITLE MONTGOMERY, JEWEL NAME NAME STREET ADDRESS STREET ADDRESS 5437 KAREN CT. CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32811 Π Delete TITLE ☐ Change ☐ Addition TITLE NAME HIGHTOWER, JOHN NAME STREET ADDRESS 436 SUNSET DR. STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32805 CITY-ST-ZIP TS TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME HIGHTOWER, ADA NAME STREET ADDRESS STREET ADDRESS 436 SUNSET DR. CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32805 ☐ Delete TITLE TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

MALLOUS STATES AND TO THE OFFICER OR DIRECTOR

☐ Delete

1-17-00 407-423-02

☐ Change

☐ Addition

N98000001078

True Gospel Pentecostal Church

18766

4327 Columbia Street
Orlando, Florida 32811
(407) 295-0700 (Church) • (407) 299-9131 (Pastor)
Pastor — Reverend Moses Montgomery

Orl. Flow, July 17,00

To whomst my Cancern's
This is our annual Report correction of
Our fee has already here pand
Since april 10. 2000. Thank your any
Question Call me at 407-423.8223
Thanks Was ada M. Heghtower