## 2001 UNIFORM BUSINESS REPORT: (UBR)

SIGNATURE:

## Jul 10, 2001 8:00 am Secretary of State DGGUMENT # N98000001246 05-10-2001 90198 020 \*\*\*\*70 00 WINNING SOULS FOR CHRIST REVIVAL CENTER, INC. Voice of The Watchwar Principal Place of Business Mailing Address 117 SW 3RD STREET POST OFFICE BOX 129 BELLE GLADE FL 33430 SOUTH BAY FL 33493 75869 2. Principal Place of Business 3. Mailing Address 30 i - Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Belle Glade, FL City & State 4. FEI Number Applied For APPLIED FOR 65-099 Not Applicable 5. Certificate of Status Desired Country \$8.75 Additional 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) BELL DOROTHY B 220 SW 2ND AVENUE SOUTH BAY FL 33493 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. SIGNATURE Signsture, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: **\$5.00** May Be Make Check Pavable to 9. Election Campaign Financing Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ☐ Addition TITLE ☐ Delete m.e NAME BELL DOROTHY B NAME STREET ADDRESS STREET ADDRESS 220 SW 2ND AVENUE CITY-ST-ZIP CITY-ST-ZIP SOUTH BAY FL 33493 , \_\_\_, Celete TITLE TITLE Willie J. Bell ☐ Change Addition NAME BENNETT, TAKELIA NAME and sw and Ave STREET ADDRESS STREET ADDRESS 120 SPARROW DRIVE, APT. 203 SouthBay, FL 33493 CITY-ST-ZIP CITY-ST-ZIP ROYAL PALM BEACH FL 33411 ☐ Delete TITLE TITLE Change ☐ Addition BENNETT, CARLISLE NAME ... STREET ADDRESS 220 SW 2ND AVE STREET ADDRESS CITY-ST-ZIP SOUTH BAY FL 33493 CITY-ST-ZIP Addition Addition TITLE Delete TITI F ines vingstone NAME MOORE, CHARSZETTE NAME POBBENIO8 STREET ADDRESS STREET ADDRESS P.O. BOX 2262 CITY-ST-ZIP CITY-ST-ZIP BELLE GLADE FL 33430 ı.Behamas TITLE Delete TITLE Change ☐ Addition NAME WEST, ERIC NAME STREET ADDRESS 248 CARVER PLACE STREET ADDRESS CITY-ST-ZIP PAHOKEE FL 33476 CITY-ST-ZIP TITLE ☐ Defetæ TITLE ☐ Change ☐ 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.

FILED