

**2001 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **N98000003087**  
 1. Entity Name  
**Jesus Holiness Pentecostal Church, Inc.**

**FILED**  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**01 SEP 18 AM 11:05**

Principal Place of Business Mailing Address  
**1111 Pamela Street**  
**Leesburg, Florida 34748** **W6100020554**

2. Principal Place of Business 3. Mailing Address  
**719 East Orange Ave** **20 Sun Country Court**  
 Suite, Apt. #, etc. Suite, Apt. #, etc.  
**Eustis, Florida**  
 City & State City & State  
**Eustis, Florida** **Eustis, Florida**  
 Zip Country Zip Country  
**32726 LAKE** **32726 LAKE**

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For  
**59-3543998** Not Applicable  
 5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required  
 6. Name and Address of Current Registered Agent  
**LARRY B. EVANS SR.**  
**20 Sun Country Court**  
**Eustis, Florida 32726**  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City FL Zip Code

7. Name and Address of New Registered Agent  
 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  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW:**  
**FEES 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	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>P. LARRY B. EVANS SR.</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>20 Sun Country Court</b>		CITY-ST-ZIP		
	<b>Eustis Florida 32726</b>				
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>FRANCES M. EVANS</b>		STREET ADDRESS	<b>400004610124--8</b>	
CITY-ST-ZIP	<b>20 Sun Country Court</b>		CITY-ST-ZIP	<b>-09/25/01--01041--023</b>	
	<b>Eustis Florida 32726</b>			<b>****192.50 ****192.50</b>	
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>S/T Thelma O. Gates</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>1002-61st Ave. South</b>		CITY-ST-ZIP		
	<b>Seattle, Washington 98178</b>				
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>D. William U. Jones</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>16455 SE. 39th</b>		CITY-ST-ZIP		
	<b>Bellevue Washington 98008</b>				
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>D. Mattie J. Bass</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>11022 SE. 269th St.</b>		CITY-ST-ZIP		
	<b>Kent Washington 98031</b>				
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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.

SIGNATURE: **Larry B. Evans Sr.** August 24, 2001 1-3525895987

CR2E037 (11/00)