

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2002 8:00 am
Secretary of State

02-25-2002 90571 040 ***61.25

DOCUMENT # N98000004970

1. Entity Name

EASTSIDE ASSEMBLY OF GOD OF TALLAHASSEE, INC.

Principal Place of Business

**1310 CROSS CREEK CIRCLE
 #B
 TALLAHASSEE FL 32301**

Mailing Address

**1310 CROSS CREEK CIRCLE
 #B
 TALLAHASSEE FL 32301**

2. Principal Place of Business

**1160 CAPITAL CIRCLE SE
 Suite, Apt. #, etc.**

3. Mailing Address

**1160 CAPITAL CIRCLE SE
 Suite, Apt. #, etc.**

City & State

TALLAHASSEE, FL.

City & State

TALLAHASSEE, FL.

4. FEI Number

59-3396063

Applied For

Not Applicable

Zip

Country

32311 LEON

Zip

Country

32311 LEON

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**DYER, KENNY
 1310 CROSS CREEK CIRCLE
 #B
 TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1160 CAPITAL CIRCLE SE

TALLAHASSEE

City

FL

Zip Code

32311

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: 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 ☐ Delete
 NAME **D**
 STREET ADDRESS **MORTON, MICHAEL**
 CITY-ST-ZIP **2125 FAULK DR
 TALLAHASSEE FL 32311**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **MCGREGOR, KENT**
 CITY-ST-ZIP **4119 LOUVENIA DR
 TALLAHASSEE FL 32311**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **CAYSON, RICHARD**
 CITY-ST-ZIP **3970 MCWEST COURT
 TALLAHASSEE FL 32303**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **DYER, KENNY**
 CITY-ST-ZIP **1310 CROSS CREEK CIRCLE, #B
 TALLAHASSEE FL 32301**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 **1160 CAPITAL CIRCLE SE**
 CITY-ST-ZIP **TALLAHASSEE FL 32311**

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:

RICHARD CAYSON

2/11/02

562-1802

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/01)