

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000007098

1. Entity Name

FAITH CHRISTIAN Assembly of Central

FLORIDA 200 MAR -3 PM 12:07

Principal Place of Business

SAME

Mailing Address

769 Peters RD
BARTON FL. 33830

2. Principal Place of Business

SAME

3. Mailing Address

769 Peters RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BARTON FL

4. FEI Number

65-0862931

Applied For

Not Applicable

Zip

Country

Zip

Country

33830

U.S.

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Rev. LAWRENCE C. GEIBER JR.

769 Peters RD

BARTON, FL. 33830

7. Name and Address of New Registered Agent

Name

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

City

FL

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

Rev. Lawrence C. Geiber Jr.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2-17-00

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)

☒

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE President ☐ Delete

NAME LAWRENCE C. GEIBER JR.

STREET ADDRESS 769 Peters RD

CITY-ST-ZIP BARTON, FL 33830

TITLE TRUSTEE ☐ Delete

NAME LAWRENCE C. GEIBER SR.

STREET ADDRESS 769 Peters RD

CITY-ST-ZIP BARTON FL 33830

TITLE GLEN KIRKLAND Trustee ☐ Delete

NAME GLEN KIRKLAND

STREET ADDRESS 612 AVE O-S-W

CITY-ST-ZIP WINTER HAVEN, FL. 33880

TITLE TRUSTEE ☒ Delete

NAME JAMES MILLS

STREET ADDRESS 7805 U.S. 98 N. #64

CITY-ST-ZIP LAKE LAND, FL. 33809

TITLE TRUSTEE ☐ Delete

NAME CHARLES RAYBORN

STREET ADDRESS 2305 S. WIGGINS RD

CITY-ST-ZIP PLANT CITY, FL. 33566

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

600003164666--8

-03/10/00--01011--001

*****80.00 ☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TRUSTEE
OTIS JACOBS
1216 S. FL. AVE.
LAKE LAND, FL. 33815

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Rev. Lawrence C. Geiber Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-17-00

Date

863-533-0084

Daytime Phone #

CR2E034 (9/99)