2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 AM
Secretary of State

DOCUMENT# N98000007301

Entity Name: SUNCOAST COMMUNITY CHURCH, INC.

Current Principal Place of Business:

18115 US HWY 41 N
SUITE 100
LUTZ, FL 33549

New Principal Place of Business:

Current Mailing Address:

18115 US HWY 41 N
SUITE 100
LUTZ, FL 33549

New Mailing Address:

FEI Number: 59-3555710 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HALE, ALFRED
11010 CARROLLWOOD DR
TAMPA, FL 33618

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GRIFFETH, TAM
Address: 10222 NEWPORT CIR
City-St-Zip: TAMPA, FL 336127304

Title: DP ( ) Delete
Name: HALE, ALFRED
Address: 11010 CARROLLWOOD DR.
City-St-Zip: TAMPA, FL 33618

Title: SD ( ) Delete
Name: KERLEY, IRL E
Address: 206 NE FIRST AVENUE
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: HALE, ALFRED P MR
Address: 11010 CARROLLWOOD DRIVE
City-St-Zip: TAMPA, FL 33618

Title: D (X) Change ( ) Addition
Name: LONG, EUGENE A MR
Address: 16406 SHAGBARK PLACE
City-St-Zip: TAMPA, FL 33618

Title: D (X) Change ( ) Addition
Name: SEAL, GLYNN D MR
Address: 23173 GENEVA ROAD
City-St-Zip: LAND O LAKES, FL 34639

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GLYNN D. SEAL D 05/06/2002

Electronic Signature of Signing Officer or Director — Date