

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000002093

1. Entity Name

RAINBOW PROMISE METROPOLITAN COMMUNITY CHURCH, I
NC.

Principal Place of Business

3140 TROY AVE.
LAKELAND FL

Mailing Address

1602 ELDORADO DRIVE
LAKELAND FL 33815

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3577713

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DUCHAM, KAREN REV.
1602 ELDORADO DRIVE
LAKELAND FL 33815

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME TT
STREET ADDRESS MCGUINN, SHAWN
CITY-ST-ZIP 931 CUMBERLAND ST
LAKELAND FL 33801

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME PT
STREET ADDRESS MARR, MARILYN
CITY-ST-ZIP 8018 GLENRIDGE LOOP E
LAKELAND FL 33809

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME PD
STREET ADDRESS DUCHAM, KAREN REV
CITY-ST-ZIP 1602 ELDORADO DRIVE
LAKELAND FL 33815

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS BUSH, RONALD
CITY-ST-ZIP P.O. BOX 2283
ORLANDO FL 32802

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS CHRIS WEALIS
CITY-ST-ZIP 1400 GRASSLANDS BLVD, # 27
LAKELAND, FL 33803

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS NANCY BASSETT
CITY-ST-ZIP 1615 ESTATE DRIVE
LAKELAND, FL 33815

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Feb 07, 2002 8:00 am
Secretary of State

02-07-2002 90311 006 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)