NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9900005403 / 1. Entity Name
GOD'S Holy Temple Dutreach Minitistices, INCORP



FILED Apr 11, 2003 8:00 am Secretary of State

04-11-2003 90119 015 ****70.00

DO NOT WRITE IN THIS SPACE				
2. Principal Place of Business 2. Walling Address 3. Mailing Address 3. Suite, Apt. #, etc.	11 ^{oh} street	DO NOT WRITE IN THE	IS SDACE	
Suite, Apr. #, stc.			DO NOT WRITE IN THIS SPACE	
City & State Clorida City & State	Clasida	4. FEI Number	Applied For	
FORT PIERCE, Florida Fort Pierce,	Horida		Not Applicable	
34950 ST. Lucie 34950	ST. LUCIE	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	7. Name and Address of Current Registered Agent			
DO NOT WRITE	Name Cassandla Speaks			
DO NOT WRITE Street Address (P.O. Box Number is Alot Acceptable)				
IN THIS SPACE				
i delega de la figura desenva estado a qual esta estada de estada para en cara se estada en estada en estada La figura estada en e	City Eng +	Pierce F	Zip Code	
The above named entity submits this statement for the purpose of changing its re	raistered office or registers			
the obligations of registered agent.	gistored office of registere	ed agont, or both, in the state of Fonda. Fair	manimal with, and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: R	legistered Agent signature required	when reinstating) DATE		
FEE IS \$61:25 9. Election Camp	~ ~		eck Payable to	
Initial or Amended UBR Trust Fund Cor	inibotion.	Added to Fees Florida Depi	artment of State	
10. OFFICERS AND DIRECTORS			rans para ranga kanangan kanangan sa	
NAME GLYN HAUGOLDY 2R.	TITLE NAME			
STREET ADDRESS 215 A N. INONSTRUCT	STREET ADDRESS			
CITY-ST-ZIP FORT PIECCE, Florida 34950	CTTY-ST-ZIP			
The Pastol - company	TITLE			
NAME DOUGLAS E. Symonette D STREET ADDRESS 16018 Ave th	NAME STREET ADDRESS			
CITY-ST-ZIP FOR + PIECE Florida 34946	CITY-ST-ZIP			
TITLE Recording Secretary	TITLE			
NAME CASSANALA SPEALS STREET ADDRESS 7112 AUG SPEALS	NAME STREET ADDRESS			
CITY-ST-ZIP FOR PIERCE, Florida 34947	CITY-ST-ZIP	DO NOT WR	ITE	
The Financial Secretary Treasural	TITLE	IN THIS SPA	CE	
NAME STREET ADDRESS THE TADDRESS THE TADDRES	NAME		VE	
CITY-ST-ZIP FORT PICKCE, Florida 34950	STREET ADDRESS CITY-SI-ZIP			
TITLE	TITLE			
NAME	NAME			
STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP	en talen er en		
TITLE	TITLE	and the second s		
NAME	NAME			
STREET ADDRESS CITY, ST. 7JP	STREET ADDRESS			

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 on an attachment with an address! with all officers are not supplied with the information supplied with the information supplied with the information indicated on this report or supplied with the information indicated on this report or supplied with the information indicated on this report or supplied with the information indicated on this report or supplied with the information indicated on this report or supplied with the information indicated on this report or supplied with the information indicated on this report or supplied with the information indicated on this report or supplied with the information indicated on this report or supplied with the information indicated on this report or supplied with all of the information indicated on this report or supplied with the information indicated on this report or supplied with the information indicated on the indicated on the indicated on the indicated on the indicated or supplied with the information indicated on the indicated or supplied with the information indicated on the indicated on the indicated or supplied with the information indicated on the indicated or supplied with the information indicated or supplied

SIGNATURE: WILLOW NUMBEROOF Africe Z. Hangabook 3/27/03(m2) 465-1016