

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000005801

1. Entity Name

CHRISTIAN PENTECOSTAL APOSTOLIC CHURCH OF CHRIST

FILED
Sep 12, 2000 8:00 am
Secretary of State

09-12-2000 90018 028 ****70.00

Principal Place of Business

7229 WOODHILL PARK DRIVE
 SUITE 316
 ORLANDO FL 32818

Mailing Address

7229 WOODHILL PARK DRIVE
 SUITE 316
 ORLANDO FL 32818

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

59-3600811

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

SPIEGEL & UTRERA, P.A.
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134

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
After September 13, 2000 min. will be \$236.25

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 PD
 NAME HOLMES, CHRISTOPHER ☐ Delete
 STREET ADDRESS 7229 WOODHILL PARK DRIVE
 CITY-ST-ZIP ORLANDO FL 32818

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

TITLE VD
 NAME HOLMES, THEOLA ☐ Delete
 STREET ADDRESS 7229 WOODHILL PARK DRIVE
 CITY-ST-ZIP ORLANDO FL 32818

TITLE ☒ Change ☐ Addition
 NAME VISID
 STREET ADDRESS Holmes, Theola
 CITY-ST-ZIP 7229 Woodhill Park Drive
 Orlando FL 32818

TITLE D
 NAME DECOSEY, ROBERT D. ☐ Delete
 STREET ADDRESS 7229 WOODHILL PARK DRIVE
 CITY-ST-ZIP ORLANDO FL 32818

TITLE ☐ Change ☒ Addition
 NAME T
 STREET ADDRESS Gwendolyn J. Dixon
 CITY-ST-ZIP 1989 Lakhill Circle
 Orlando FL 32818

TITLE S
 NAME CANTLOW, ANNALISHA ☒ Delete
 STREET ADDRESS 7229 WOODHILL PARK DRIVE
 CITY-ST-ZIP ORLANDO FL 32818

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

TITLE T
 NAME FANN, RONALD L JR. ☒ Delete
 STREET ADDRESS 7229 WOODHILL PARK DRIVE
 CITY-ST-ZIP ORLANDO FL 32818

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

TITLE
 NAME ☐ Delete
 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: Holmes VD 7/10/00 407-294-5234
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (5/00)