2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9900005801

1. Entity Name

CHRISTIAN PENTECOSTAL APOSTOLIC CHURCH OF CHRIST

Principal Place of Business 7229 WOODHILL PARK DRIVE Mailing Address

7229 WOODHILL PARK DRIVE

FILED
Sep 09, 2002 8:00 am §
Secretary of State
09-09-2002 90013 006 ****70.00

SUITE 316 ORLANDO FL 32818		SUITE 316 ORLANDO FL 32818					10 11 91 11 81 21) 	I B.S.D.I. SEGUE SA DEL		
2. Principal Place of Business			3. Mailing Address								
Suite-Apt.,#Fetc			Suite, Apt. #, etc.			بد - ســـــــــــــــــــــــــــــــــــ	DO NOT WRI	TE IN THIS S	PACE	.	
City & State			City & State				4. FEI Numbe	59-3600811			oplied For
Zip		Country	Zip	Country			5. Certificate	of Status Desired	- m	\$8.75 Add	ot Applicable ditional
	6 Name	and Address of Current R	existered Agent			7. Name and Address of New Registered Agent					
	o. wame	and Address of Outline	angistarau Agent	Name							
	& UTRERA			Street Ad-		dress (P.O. Box Number is Not Acceptable)					
	eria aveni Bables fl				00					T =	
		·			City		FL Zip Coo			e	
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											
•	Signature, typed	or printed name of registered agent ar	nd title if applicable. (NOTE	: Registere	d Agent signature i	Agent signature required when reinstating) DATE					
<u> </u>			- C Flanting Compains					44-1-	. 06		
FILE NOW: FEE IS \$61.25			—9. Election Campaign Financing Trust Fund Contribution.			\$5.0 Added	O May Be to Fees		Make Check Payable to Department of State		
10.		OFFICERS AND DIRE	CTORS 11.			A	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			l 10	
TITLE	PD		☐ Delete	☐ Delete TITLE						Change	Addition
NAME	HOLMES,	HOLMES, CHRISTOPHER		NAM	E						
STREET ADDRESS	7229 WOODHILL PARK DRIVE		STREE		ET ADDRESS						}
CITY-ST-ZIP	ORLANDO FL 32818		CITY		-ST-ZIP						
TITLE	VD		Delete TITLE		E					Change	☐ Addition
NAME	HOLMES, THEOLA		NAM		E						
STREET ADDRESS CITY-ST-ZIP	7229 WOODHILL PARK DRIVE ORLANDO FL 32818				ET ADDRESS -ST-ZIP						
TITLE	D		Delete TITLE							☐ Change	☐ Addition
NAME		y, Robert D		NAM	1						
STREET ADDRESS		ODHILL PARK DRIVE		STRE	ET ADDRESS						
CITY-ST-ZIP		O FL 32818		CITY	-ST-ZIP						
TITLE	. S	1	☐ Delete	TITLE	E				-	☐ Change	☐ Addition
NAME .		V, ANNALISHA		NAME	E						
STREET ADDRESS_		ODHILL PARK DRIVE			ET ADDRESS						`
CITY-ST-ZIP	_	O FL 32818		CITY-	-ST-ZIP						•
TITLE	T (-	1	☐ Delete	TITLE	[☐ Change	☐ Addition
NAME		ONALD L JR.		NAME	E						
STREET ADDRESS				STREET ADDRESS							1.
CITY-ST-ZIP	ORLAND(D FL 32818		CITY-	-ST-ZIP						
TITLE •	· if	}	☐ Delete	TITLE						Change	Addition
NAME	· · · //			NAME	E						- <i>;</i>
STREET ADDRESS	Ä.				ET ADDRESS						_ ,
CITY-ST-ZIP		*		CITY-	-ST-ZIP						٠.

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: