(9/01)

2002 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 30, 2002 8:00 am DOCUMENT # N99000005929 **Secretary of State** CALVARY HILL PENTECOSTAL CHURCH, INC. 01-30-2002 90036 035 ****61.25 Principal Place of Business Mailing Address 3652 ROCHE AVE. PO BOX 629 VERNON FL 32462 VERNON FL 32462 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3389969 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HADDOCK, PRESTON 2881 PIONEER RD VERNON FL 32462 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. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. DON LEVENS DiA TITLE Change Addition TITLE Delete Brock, Boone NAME NAME 4173 Douglas FERRY Rd. 3200 BOONE DR. STREET ADDRESS STREET ADDRESS Caryville Fl. 32427 CITY-ST-ZIP vernon FL 32462 CITY-ST-ZIP TITLE Delete Addition TITLE **Change** Thomas Reynolds Bush, Tim NAME NAME 2620 PARRISH STILL, RD STREET ADDRES STREET ADDRESS CITY~ST-ZIP VERNON FL 32462 CITY-ST-ZIP YERNON. TITLE ☐ Delete TITLE Change ☐ Addition HADDOCK, RICKY NAME NAME 2684 MUD HILL RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERNON FL 32462 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition HADDOCK, WILTON NAME NAME 2722 BONNETT POND RD., STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHIPLEY FL 32428 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition PARISH, L. C. NAME NAME 3019 DAWKINS ST. STREET ADDRESS STREET ADDRESS CITY - ST-ZIP **VERNON FL 32462** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition SMITH, STEVE NAME NAME STREET ADDRESS PO BOX 207 STREET ADDRESS CITY-ST-ZIP VERNON FL 32462 CITY-ST-7/P

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.

Daytime Phone #