2001 UNIFORM BUSINESS REPORT (UBR)

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FILED
Mar 19, 2001 8:00 am
Secretary of State
02-19-2001 90021 032 ****61.25

DOCUMENT # N99000006620

1. Entity Name

RAINBOW MINISTRIES CHURCH OF GOD IN CHRIST, INC.

Principal Place of Business	Mailing Address
5701 S. 79TH ST. TAMPA FL 33619	5701 S. 79TH ST. TAMPA FL 33619

31555

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1804 W Waters Ave	
Suite, Apt. #, etc. Suite B	Suite, Apt. #, etc.
City & State Tampa, Florida	City & State
Zip 33604 Country Hillsborough	Zip Country

4. FEI Number 59-3636477 ☐ 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
GREEN, JOSEPH B PASTOR 5701 S. 79TH ST. TAMPA FL 33619	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: Celestine R. Davis 2/28/01
(Name, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when changing) 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	T GREEN, MATTIE F 5701 S. 79TH ST. TAMPA FL 33619	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Trustee Chairman/Business Mgr. Celestine Davis 218 Limona Road Brandon, FL 33510	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JACKSON, JOHN 732 S. 58TH ST TAMPA FL 33619	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JACKSON, REBECCA 732 S. 58TH ST TAMPA FL 33619	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SUTTLE, MARY 4305 E HENRY AVE TAMPA FL 33610	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: Celestine R. Davis 2/28/01 813-643-5496
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #