

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2000 8:00 am
Secretary of State

02-14-2000 90022 021 ****70.00

DOCUMENT # P18352

1. Entity Name

ZION'S ISRAELITES GOD'S HOLY CHURCH IN CHRIST OF THE U.S.A. INC.

Principal Place of Business

Mailing Address

8724 NORTH 27TH STREET
 CHURCH HOME
 TAMPA FL 33604-201
 US

8724 NORTH 27TH STREET
 CHURCH HOME
 TAMPA FL 33604-2201
 US

00019130



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

52-1369211

Applied For

Not Applicable

Zip

Country

Zip

Country

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

PADGETT, SR BISHOP HOHN H. (Bishop)
 8724 NORTH 27TH STREET
 TAMPA FL 33604-2201

Name

PADGETT, John H. SR. (Bishop)

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.

NO CHANGES

SIGNATURE

Bishop John H. PADGETT, SR. Bishop John H. Padgett Sr.

JANUARY 2000

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**

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 | B PADGETT, SR JOHN H 8724 NORTH 27TH STREET TAMPA FL 33604-2201 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CD COTTMAN, OMAR RT. 3, BOX 359M PRINCESS ANNE MD 21853 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD TATEM, ZEBORAH A. 313 PENN ST. SAUSBURY MD 21801 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T BURKES, LONNIE F. RT. 1 BACKBONE RD. EDEN MD 21822 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | C CONWAY, JOHN C. RT. 1 BOX 158 PRINCESS ANNE MD 21853 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S SMITH, JAMES JR. RT. DEAL ISLAND RD. PRINCESS ANNE MD 21853 | <input type="checkbox"/> Delete |

| | | |
|--|-------------------|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | NO CHANGES | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | NO CHANGES | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | NO CHANGES | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | NO CHANGES | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | NO CHANGES | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | NO CHANGES | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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: Bishop John H. Padgett Sr. Bishop John H. Padgett Sr. SUPAEME Bishop AND Chief PARSERA 5 JANUARY 2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 5/1/2000 Daytime Phone #