

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90552 027 *****80.00

DOCUMENT # P18352

1. Entity Name

**ZION'S ISRAELITES GOD'S HOLY CHURCH IN CHRIST OF
THE UNITED STATES OF AMERICA INC.**



Principal Place of Business

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

Mailing Address

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

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 **52-1369211**

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

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

Name **NO CHANGE**

Street Address (P.O. Box Number is Not Acceptable)

City **SAME AS ITEM #6 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Bishop John H. Padgett, Sr. SUPREME BISHOP AND CHIEF OVERSEER 11 JAN. 03
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**

**#80.00
Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NO CHANGE 11 JAN. 03	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	" "	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	" "	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	" "	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: BISHOP JOHN H. PADGETT, SR. SUPREME BISHOP AND CHIEF OVERSEER 11 JAN. 03

CR2E037 (10/02)