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

DOCUMENT # N28905



FILED
Feb 17, 2003 8:00 am §
Secretary of State

1. Entity Na	OSTAL CHURCH OF GOD	IN CHRIST, INC.			02-17-2003 90158 01	0 ****61	25	
624 NORTH 9TH STREET 62		Mailing Address 624 NORTH 9TH STREET PALATKA FL 32177	624 NORTH 9TH STREET					
2. Principal	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES			
City & State		City & State	City & State		4. FEI Number 59-2976982 Applied Fo			
Zip	Country	Zip	Country	5. Certificate of St		\$8.75 Ad Fee Require		
	6. Name and Address of Curre	ent Registered Agent	<u>-1 </u>	7. Name and Add	ress of New Registered A			
			Name	, vanio and Add	. DO OI HOW REGISTERED A	Acui		
4506 PC	PAMELA T ONTIAC ST A FL 32177		Street Address (I		lot Acceptable)		7.1	
FALAIN	A FL 32171		City			I Zin Coo	7-	
_	e named entity submits this statemen		'		FL	Zip Coo		
	FILE NOW: FEE IS \$61.25		DATE Appendiction signature required when reinstating) DATE Make Check Payable to Florida Department of State					
10.	OFFICERS AND I	DIRECTORS	11.	ADDITIONS/CHANGE	S TO OFFICERS AND DIR	ECTORS IN	I 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WARD, PAMELA T 4506 PONTIAC ST. PALATKA FL 32177	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M SHAW, JOHNNY L RT 6 BOX 490 PALATKA FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	مسيد المستود		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MELTON, JOHN 411 ASH STREET PALATKA FL 32177	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME Street address City-St-Zip	D MIDDLEBROOK, DORETHA 520 SOUTH 15TH STREET PALATKA FL 32177	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		1	☐ Change	☐ Addition	
TITLE Name Street Address City-St-2ip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Minister Arthur L. Wi 4506 fontiac Palgyka, Fu	ard, Sr. 1 St. 32177	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	d in Section 119 07(3Vi) Flor	[Change	Addition	

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 chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE