

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 19, 2001 8:00 am
Secretary of State

06-19-2001 90878 014 ****61.25

DOCUMENT # 841671

1. Entity Name

WORLD EVANGELISM OF THE STATE OF CALIFORNIA, INC.

(Handwritten initials)

Principal Place of Business

Mailing Address

INTERNATIONAL HEADQUARTERS
 P O BOX 85277
 SAN DIEGO CA 92186

INTERNATIONAL HEADQUARTERS
 P O BOX 85277
 SAN DIEGO CA 92186

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

95-2372233

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

**WINTER, EDWARD J.
 19 W. FLAGLER ST.
 SUITE 1101 BISCAYNE BLDG.
 MIAMI FL 33130**

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

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: **S** Delete
 NAME: **CERULLO, THERESA**
 STREET ADDRESS: **3545 AERO COURT**
 CITY-ST-ZIP: **SAN DIEGO, CA 00000**

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: **P** Delete
 NAME: **CERULLO, MORRIS**
 STREET ADDRESS: **3545 AERO COURT**
 CITY-ST-ZIP: **SAN DIEGO, CA 00000**

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: **D** Delete
 NAME: **SMITH, FREDERICK C JR**
 STREET ADDRESS: **6400 E HORSESHOE ROAD**
 CITY-ST-ZIP: **PARADISE VALLEY AZ**

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: **D** Delete
 NAME: **BLAIR, CHARLES**
 STREET ADDRESS: **200 S UNIVERSITY BLVD**
 CITY-ST-ZIP: **DENVER CO**

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: **D** Delete
 NAME: **GROENKE, JOHN**
 STREET ADDRESS: **3216 TANGLEWOOD DR**
 CITY-ST-ZIP: **ROCK HILL SC**

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: **D** Delete
 NAME: **CERULLO, DAVID**
 STREET ADDRESS: **8800 COVE ROSE COURT**
 CITY-ST-ZIP: **CHARLOTTE NC**

TITLE: Change 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)(f), 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:

(Handwritten Signature)
 SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

(Handwritten Date)
 Date

(Handwritten Phone Number)
 Daytime Phone #

CR2E037 (10/00)