

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

DOCUMENT # N00000000710

1. Entity Name
Tag Team Ministries, Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2603 Sparkman Rd
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Plant City, Fla.
Zip
33566

City & State
Country
Zip
Country

4. FEI Number
59-3743144
Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Marty Rogers
Street Address (P.O. Box Number is Not Acceptable)
2603 Sparkman Rd.
City
Plant City FL Zip Code
33566

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
Marty Rogers
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$61.25
Initial or Amended UBR

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President & CEO Director
Marty Rogers
2603 Sparkman Rd.
Plant City, Fla 33566

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
400009789044
01/02/03--01051--018 **87.50

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice President Director
Randy Rogers
2603 Sparkman Rd.
Plant City, Fla. 33566

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Larry Conner Director
P.O. Box 864,
Dover, Florida 33527

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Marty Rogers

1/3/03 813-759-8543

CR2E037B (12/01)