

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2000 8:00 am
Secretary of State

03-07-2000 90068 040 ****61.25

DOCUMENT # N07426

1. Entity Name
LORDSHIP MINISTRIES, INC.

Principal Place of Business

% RICHARD M. MOWRY JR.
 1618 S.E. 3RD COURT
 DEERFIELD BEACH FL 33441

Mailing Address

% RICHARD M. MOWRY JR.
 1618 S.E. 3RD COURT
 DEERFIELD BEACH FL 33441-4419

2. Principal Place of Business

P. David Nicholas
 5856 Vista Linda Lane

3. Mailing Address

P. David Nicholas
 5856 Vista Linda Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Boca Raton, FL

City & State

Boca Raton, FL

4. FEI Number

59-2575706

Applied For

Not Applicable

Zip

33433

Country

Palm Beach

Zip

33433

Country

Palm Beach

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MOWRY, RICHARD M., JR.
 1618 S.E. 3RD COURT
 DEERFIELD BEACH FL 33441

7. Name and Address of New Registered Agent

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

TITLE	PD	<input type="checkbox"/> Delete
NAME	NICHOLAS, P DAVID	
STREET ADDRESS	5856 VISTA LINDA LANE	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	STD	<input type="checkbox"/> Delete
NAME	NICHOLAS, ELEANOR	
STREET ADDRESS	5856 VISTA LINDA LANE	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	MOWRY, RICHARD M., JR.	
STREET ADDRESS	1618 S.E. 3RD COURT	
CITY-ST-ZIP	DEERFIELD BEACH FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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		
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: *Richard Mowry Jr.*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/29/00 (561)994-5000
 Date Daytime Phone #

CR2E037 (9/99)