

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2001 8:00 am
Secretary of State
 04-02-2001 90288 037 ****61.25

0024036

DOCUMENT # N32261

1. Entity Name
HOUSE OF REFUGE MINISTRIES, INC.

Principal Place of Business 1001 CELERY AVE P.O. BOX 2982 SANFORD FL 32772-9982 US	Mailing Address 1001 CELERY AVE P.O. BOX 2982 SANFORD FL 32772-9982 US
---	---

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
---	---

City & State	City & State	4. FEI Number 59-2957129	Applied For ☐ Not Applicable
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
**RICHARDSON, DORA W
 601 S. SANFORD ST.
 SANFORD FL 32771** *3291 Safe Harbor Lane
 Lake Mary, FL 32746*

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 _____ (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 NAME STREET ADDRESS CITY-ST-ZIP	S HICKMAN, ADONIS W 2200 DOLARWAY ST SANFORD FL 32771 <i>Duplicate</i>	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC RICHARDSON, DORA W 601 S SANFORD AVE SANFORD, FL 32771 <i>Address Change</i>	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS HICKMAN, ADONIS W 2200 DOLAR WAY ST SANFORD FL 32771	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JOHNSON, ALVIN 909 HOLLY AVE SANFORD FL <i>Address Change</i>	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, JANET 2300 WATER STREET SANFORD FL 32771	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, DEBORAH 2010 JACK CT SANFORD FL	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Stoves, Terence 124 Monterey Oaks Dr. Sanford, FL 32771	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Darrilyn Stoves 124 Monterey Oaks Dr. Sanford, FL 32771	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Russell Holloman 1310 W. 3rd St. Sanford FL 32771	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC Richardson, Dora W. 3291 Safe Harbor Lane Lake Mary, FL 32746	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JOHNSON, Sr., Alvin 2718 Teak Place Lake Mary, FL 32746	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: DOROTHY W. RICHARDSON - PC **3-30-01 407 324711**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)