2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 13, 2000 8:00 am
Secretary of State
07-13-2000 90019 004 ****61.25

DOCUMENT # N38633

1. Entity Name

THE CORNERSTONE MINISTRIES OF HILLIARD, INC.

Principal Place of Business	Mailing Address
2226 N KINGS RD P.O BOX 1167 HILLIARD FL 32046 US	P.O BOX 1107 312 ORANGE ST HILLIARD FL 32046-1107 US

DO NOT WRITE IN THIS SPACE

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 59-3028140 ☐ 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
VANZANT, W. C. 312 ORANGE ST. HILLIARD FL 32046	Name BARBARA J. VANZANT Street Address (P.O. Box Number is Not Acceptable) PO Box 1107 312 ORANGE ST. City HILLIARD FL Zip Code 32046

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 Barbara J. VanZant 6/12/00
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BAGBY, ARDYTHE W ROUTE 3, BOX 193 N/A HILLARD FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P. ARDYTHE W. BAGBY RT 3 Box 193 NA HILLIARD, FL 32046	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NETTLES, BARBARA D P.O BOX 1561 N/A CALLAHAN FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP VANZANT, BARBARA 312 ORANGE STREET HILLIARD FL 32046	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BARBARA VANZANT 312 ORANGE ST HILLIARD FL 32046	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P VANZANT, W.C. 312 ORANGE STREET HILLIARD FL 32046	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/D JANINE P. BARKER 647 CAMP PINKNEY RD FOLKSTON, GA 31537	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BAGBY, ARDYTHE W ROUTE 3, BOX 193 HILLIARD FL 32046	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GWEN JONES PO BOX 1504 NA CALLAHAN, FL 32011	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ROMERO, VERONA B RT 3 BOX 790 N/A HILLIARD FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VERONA B ROMERO RT3 Box 790 NA HILLIARD FL 32046	☑ Change ☐ Addition

CR2E037 (9/99)

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: Barbara J. VanZant TYPED BARBARA VANZANT 6/12/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #