2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2001 8:00 am
Secretary of State
05-10-2001 90172 023 ****61.25

DOCUMENT # N48446

1. Entity Name

JOHN BEVERE MINISTRIES, INC.

Principal Place of Business	Mailing Address
2527 E. SEMERAN BLVD. #3 APOKA FL 32703 US	P.O. BOX 2002 APOPKA FL 32704-2002

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
610 S. SANTA FE RIDGE DRIVE	P.O. BOX 888
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: PALMER LAKE, CO	City & State: PALMER LAKE, CO
Zip: 80133 Country: USA	Zip: 80133 Country: USA

4. FEI Number: 59-3123555 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BEVERE, JOHN PAUL, JR.
1165 SWEET HEATHER LANE
APOPKA FL 32412

7. Name and Address of New Registered Agent

Name: JAMES J. HOCTOR

Street Address (P.O. Box Number is Not Acceptable): 215 NORTH EOLA DRIVE

City: ORLANDO FL Zip Code: 32801

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: James J. Hoctor 4/26/01
JAMES J. HOCTOR
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	PD BEVERE, JOHN PAUL, JR. 1165 SWEET HEATHER LANE APOPKA FL 32712	☐ Delete	TITLE PD NAME STREET ADDRESS CITY-ST-ZIP	BEVERE, JOHN PAUL, JR. 610 S SANTA FE RIDGE DRIVE PALMER LAKE, CO 80133	XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VST BEVERE, LISA T. 1165 SWEET HEATHER LANE APOPKA FL 32712	☐ Delete	TITLE VST NAME STREET ADDRESS CITY-ST-ZIP	BEVERE, LISA T. 610 S SANTA FE RIDGE DRIVE PALMER LAKE, CO 80133	XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BRICE, JAMES A. 2227 MEADOW WOOD RD. FAYETTEVILLE NC	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD JOHNSON, LORAN 1745 LAKE BERRY DR WINTER PARK FL 32789	☐ Delete	TITLE SD NAME STREET ADDRESS CITY-ST-ZIP	JOHNSON, LORAN 610 S SANTA FE RIDGE DRIVE PALMER LAKE, CO 80133	XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: SIGNATURE REQUIRED 4/26/01

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

J. ORAN [illegible] STEPHENS