## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N98000000932

Entity Name: OPEN ARMS MINISTRIES OF YBOR CITY, INC.

FILED Jan 30, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 953 E. 11TH AVE TAMPA, FL 33605 **Current Mailing Address: New Mailing Address:** PO BOX #273874 TAMPA, FL 33688 FEI Number: 59-3444228 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VICENTE, JOEL VICENTE, JOEL 16148 FOXFIRE DRIVE 2636 AMBERSIDE WAY TAMPA, FL 33618 WESLEY CHAPEL, FL 33543 US 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: JOEL VICENTE 01/30/2003 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition VICENTE, JOEL VICENTE, JOEL Name: Name: 16148 FOXFIRE DRIVE Address: 2636 AMBERSIDE WAY Address: City-St-Zip: TAMPA, FL 33618 City-St-Zip: WESLEY CHAPEL, FL 33543 Title: VD () Delete Title: VD (X) Change ( ) Addition VICENTE, KRISTI Name: Name: VICENTE, KRISTI L Address: 16148 FOXFIRE DRIVE Address: 2636 AMBERSIDE WAY City-St-Zip: TAMPA, FL 33618 City-St-Zip: WESLEY CHAPEL, FL 33543 Title: () Delete Title: () Change () Addition BENITEZ, SAMMY Name: Name: 1519 CITRUS ORCHARD WAY Address: Address: City-St-Zip: VALRICO, FL 33594 City-St-Zip: Title: SD ( ) Delete Title: () Change () Addition Name: ROCHE, GABRIEL JR Name: 29301 BIRDS EYE DR. Address: Address: City-St-Zip: WESLEY CHAPEL, FL 33543 City-St-Zip: Title: () Delete Title: () Change () Addition ROCHE, KATHY Name: Name: 29301 BIRDS EYE DR. Address: Address: City-St-Zip: WESLEY CHAPEL, FL 33543 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition BENITEZ, ODALIS BENITEZ, ODALIS Name: Name: Address: 1519 CITRUS ORCHARD WAY Address: 1519 CITRUS ORCHARD WAY VALRICO, F; 33594 City-St-Zip: VALRICO, FL 33594 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOEL VICENTE PD 01/30/2003

VALERIE MARTINEZ, TRUSTEE 9914 TIMMONS ROAD THONOTOSASSA, FL 33592

JAMES MARTINEZ, TRUSTEE 9914 TIMMONS ROAD THONOTOSASSA, FL 33592