2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2001 8:00 am
Secretary of State
04-24-2001 90029 023 ****70.00

DOCUMENT # N98000003271

1. Entity Name: TOUCH THAT LIFE INTERNATIONAL OUTREACH MINISTRIES INCORPORATED

Principal Place of Business	Mailing Address
P.O BOX 617472 ORLANDO, FL 32861	P.O BOX 617472 Orlando FL 32861

A0055087

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
P.O Box 617472	P.O Box 617472
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ORLANDO	City & State: ORLANDO
Zip: 32861 Country: AMERICA	Zip: 32861 Country: AMERICA

4. FEI Number: 59-356-9063 ☐ 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
EVERSON, JOSEPHINE 4100 E. DIJON ORLANDO, FLA 32808	Name: Josephine Everson Street Address (P.O. Box Number is Not Acceptable): 4100 E. DIJON Dr. City: Orlando, FLA. 32808 FL Zip Code 32808

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: Josephine Everson — April 16, 01
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		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	(PVDC) JOSEPHINE EVERSON 4100 E DIJON DR. Orlando, Fla 32808	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MT/D KIMBERLY WRIGHT 4741 Pilgrims Way Orlando Fla 32808	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/D AMANDA REISE 2567 BARKWATER DR 32839	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T/D -TALISI HARDEE 2001 N. HIAWASSEE Rd. ORLANDO, Fla. 32818	☐ 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 (11/00)

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: Josephine Everson — JOSEPHINE EVERSON — April 16, 01 — 407-292-7169
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #