2002 UNIFORM BUSINESS REPORT (UBR)

Mar 27, 2002 8:00 am Secretary of State DOCUMENT # N9900003824 1. Entity Name BY FAITH RESTORATION MINISTRIES, INC. 03-27-2002 90006 030 ****61.25 Principal Place of Business Mailing Address 310 W. BAY DR. P.O. BOX 481 LARGO FL 33746 LARGO FL 33746 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3583395 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) KIMBROUGH. MICHAEL 310 W. BAY DR. **LARGO FL 33746** City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61,25 Trust Fund Contribution. **Department of State** Added to Fees *(***:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. (9/01)☐ Delete TITLE Change ☐ Addition TITLE KIMBROUGH, MICHAEL NAME NAME STREET ADDRESS STREET ADDRESS 1560 LONG ST. CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33755 Change ☐ Addition VD TITLE Delete TITLE MACK, JAMES E SR. NAME NAME STREET ADDRESS STREET ADDRESS 2043 24TH ST., S.W. CITY-ST-ZIE CITY-ST-ZIP LARGO FL 33774 TITLE חד ☐ Delete TITLE Change ☐ Addition KIMBROUGH, DEBORAH... NAME NAME STREET ADDRESS STREET ADDRESS 1560 LONG ST. CITY-ST-ZIE CLEARWATER FL 33755 CITY-ST-7IP **C**hange SD Secretory TITLE Delete TITLE Addition Vanessa Coleman EDWARDS, CHERELLE NAME NAME STREET ADDRESS 1422 SPRING LANE STREET ADDRESS 2709 Fulton St. S.W. CITY-ST-ZIP **CLEARWATER FL 33755** CITY-ST-ZIP F19 33774 X Change TITLE ☐ Delete TITLE ☐ Addition Floretha Muck MACK, FLORETHA 2043 24 51,50 STREET ADDRESS STREET ADDRESS 2043 24TH ST., S.W. CITY-ST-ZIP CITY-ST-ZIP Largo, = 14. 33774 **CLEARWATER FL 33774** TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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.

12. Thereby 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

SIGNATURE:

SIGNATURE REQUIRED M.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

12 - 446 - 0277 Daytime Phone #