## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

## **FILED DOCUMENT # P30635** Apr 10, 2000 8:00 am Secretary of State 1. Entity Name GLOBAL SERVANTS, INC. 04-10-2000 90063 010 \*\*\*\*61.25 Mailing Address Principal Place of Business 2290-A S. VOLUSIA AVE. 2290-A S. VOLUSIA AVE. **ORANGE CITY FL 32763** ORANGE CITY FL 32763-7600 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 58-1291607 Not Applicable Zip Country \$8.75 Additional Country 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) RUTLAND, TIM 2062 WEST PRAIRIE CIRCLE **DELTONA FL 32725** Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be $\Box$ Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE Change Addition TITLE ☐ Delete RUTLAND, MARK NAME NAME 723 Hanover-Ct STREET ADDRESS 912 COHUTTA-BEAVERDALE RD STREET ADDRESS Lakeland, FL 33813 CITY-ST-ZIP CITY-ST-ZIP COHUTTA GA ☐ Change **▼** Addition MD ☐ Delete TITLE TITLE Ronny Brannen 15 Colonial Dr NAME NAME RUTLAND, TIM STREET ADDRESS STREET ADDRESS 2062 WEST PRAIRIE CIRCLE Carrollton GA 30117 CITY-ST-ZIP CITY-ST-ZIP **DELTONA FL** DC Delete Change ▼ Addition TITLE TITLE Ton Brown 940 5. Steel Bridge Rd SE NAME Moye, Jim NAME STREET ADDRESS STREET ADDRESS 1768 MORRIS LANDERS DR Eatonton GA 31024 CITY-ST-ZIP CITY-ST-7IP atlanta ga X Change Addition ☐ Delete TITLE TITLE LOCKETT, LAWRENCE NAME NAME 6226 Hwy 81 E STREET ADDRESS STREET ADDRESS 1798 OAK HILL ROAD CITY-ST-ZIP CITY-ST-ZIP COVINGTON GA Change Addition Delete TITLE Don martin BEACHAM, DOUG NAME NAME 2218 Crestmont Dr. STREET ADDRESS STREET ADDRESS 3 ADVOCATE DR. Britard OH 44420 CITY-ST-ZIP CITY-ST-ZIP FRANKLIN SPRINGS GA 30639 ☐ Delete TITLE Change X Addition NAME NAME 821 Sandy Ln STREET ADDRESS STREET ADDRESS 76088 Wentherford TX CITY-ST-ZIP 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

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