

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000001217

1. Entity Name

ALMS FOR HUMANITY, INC.

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90029 036 ****61.25

Principal Place of Business

P.O. BOX 13
LAKELAND FL 33802
US

Mailing Address

P.O. BOX 13
LAKELAND FL 33802-0013
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3429755

Applied For

Not Applicable

Zip

Country

Zip

Country

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

GAINES, MICHAEL A REV
2015 DEERFIELD DRIVE
LAKELAND FL 33813

Name

Michael Rankine

Street Address (P.O. Box Number is Not Acceptable)

870 E. Main St.

Bartow

City

FL

Zip Code

33830

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

Michael Rankine

4/15/00

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	DPC	☐ Delete
NAME	GAINES, MICHAEL A REV	
STREET ADDRESS	P.O. BOX 13 N/A	
CITY-ST-ZIP	LAKELAND FL 33802	
TITLE	D	☒ Delete
NAME	MORRIS, CLARENCE	
STREET ADDRESS	5134 W. HARVARD STREET	
CITY-ST-ZIP	LAKELAND FL 33802	
TITLE	D	☒ Delete
NAME	BARON, JOSEPH N	
STREET ADDRESS	3375 BARTOW ROAD	
CITY-ST-ZIP	LAKELAND FL 33803	
TITLE	S	☐ Delete
NAME	GREEN, MARY	
STREET ADDRESS	252 WEST ARIANA	
CITY-ST-ZIP	LAKELAND FL 33803	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	P	☐ Change ☒ Addition
NAME	Daniel Johnson	
STREET ADDRESS	1145 Ohio Avenue	
CITY-ST-ZIP	Lakeland, FL 33805	
TITLE	MD	☐ Change ☒ Addition
NAME	Lorenzo Robinson	
STREET ADDRESS	1929 Providence Road	
CITY-ST-ZIP	Lakeland, FL 33805	
TITLE	D	☐ Change ☒ Addition
NAME	John Brown	
STREET ADDRESS	P O Box 282 N/A	
CITY-ST-ZIP	Lakeland, FL 33802	
TITLE	D	☐ Change ☒ Addition
NAME	Anne B. Phyll	
STREET ADDRESS	1022 Ohio Street	
CITY-ST-ZIP	Lakeland, FL 33805	
TITLE	DT	☐ Change ☒ Addition
NAME	Rushelle Perry	
STREET ADDRESS	22055. Country Loop	
CITY-ST-ZIP	Lakeland, FL 33811	
TITLE	D	☐ Change ☒ Addition
NAME	Thelma Truedell	
STREET ADDRESS	1420 N. Florida Avenue #117	
CITY-ST-ZIP	Lakeland, FL 33805	

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:

Rev Michael Rankine

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-15-00

CR2E037 (9/99)