

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 19, 2001 8:00 am**  
**Secretary of State**

03-19-2001 90029 002 \*\*\*\*61.25

0059122

**DOCUMENT # N07953**

1. Entity Name

**MINISTRY OF THE WORD INTERNATIONAL, INC.**

Principal Place of Business

Mailing Address

**% ROBERT EUGENE LEWIS  
3227 FAIR OAKS AVE  
TAMPA FL 33611**

**% ROBERT EUGENE LEWIS  
3227 FAIR OAKS AVE  
TAMPA FL 33611**

00034850



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-2505964**

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

Name

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

City

**FL**

Zip Code

**LEWIS, ROBERT EUGENE  
3227 FAIR OAKS AVE  
TAMPA FL 33611**

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

**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  
**PD  
LEWIS, ROBERT EUGENE  
3227 FAIR OAKS AVENUE  
TAMPA FL** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**33611-2707** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**STD  
LEWIS, CHARLOTTE R.  
3227 FAIR OAKS AVE  
TAMPA FL** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**33611-2707** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VD  
LEWIS, BRYCE ARTHUR  
2913 WINDING TRL DR  
VALRICO FL 33594** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**33611-2707** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VD  
LLANES, MANUEL  
9857 ELM WAY  
TAMPA FL** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DELETE** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
GIBBONS, PAT  
815 WEST OHIO AVENUE  
TAMPA FL** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**33603-5433** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
GIBBONS, PERRY  
815 WEST OHIO AVENUE  
TAMPA FL 33603** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**- 5433** ☐ Change ☒ Addition

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:**

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**3/14/2001 813/539-5016**

CR2E037 (10/00)

Attachment  
DOC #  
NO 953  
DU 41850  
DIRECTOR

MINISTRY of Word International  
3227 FAIR OAKS Ave  
Tampa, FL 33611-2707

MEIBA CALVERT  
5404 S. Himes Ave  
Tampa, FL 33611-4213

DIRECTOR

John Calvert  
5404 S. Himes Ave  
Tampa, FL 33611-4213

DIRECTOR

DEAN Goldsmith  
Freedom Plaza #121  
1010 AMERICAN Eagle Blvd  
Sun City Center, FL 33573-5281

DIRECTOR

MARIAN Goldsmith  
Freedom Plaza #121  
1010 AMERICAN Eagle Blvd  
Sun City Center, FL 33573-5281

New Director

BRIAN Lewis  
11244 Cypress Reserve Dr.  
Tampa, FL 33626-1322