

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000001209

1. Entity Name

THE WIND MINISTRIES, INCORPORATED

Principal Place of Business

135 EDGEWOOD TERRACE
SANTA ROSA BEACH FL 32459

Mailing Address

135 EDGEWOOD TERRACE
SANTA ROSA BEACH FL 32459

2. Principal Place of Business

407 Tallavana Trl

Suite, Apt. #, etc.

3. Mailing Address

407 Tallavana Trl

Suite, Apt. #, etc.

City & State

Havana, FL

Zip

32333

Country

US

City & State

Havana, FL

Zip

32333

Country

US

4. FEI Number

59-3497829

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SAULTER, CHRISTINE E
135 EDGEWOOD TERRACE
SANTA ROSA BEACH FL 32459

7. Name and Address of New Registered Agent

Name Sautler, Christine E.

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

City

Havana

FL

Zip Code

32333

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

Christine E. Sautler

2/10/01

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

TITLE PD
NAME SAULTER, JAMES A ☐ Delete
STREET ADDRESS 135 EDGEWOOD TERRACE
CITY-ST-ZIP SANTA ROSA BEACH FL 32459

TITLE STD
NAME SAULTER, CHRISTINE E ☐ Delete
STREET ADDRESS 135 EDGEWOOD TERRACE
CITY-ST-ZIP SANTA ROSA BEACH FL 32459

TITLE D
NAME RUNNELS, CLAY ☐ Delete
STREET ADDRESS 2310 DON ANDRES
CITY-ST-ZIP TALLAHASSEE FL 32303

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition
NAME Sautler, James A
STREET ADDRESS 407 Tallavana Trl
CITY-ST-ZIP Havana, FL 32333

TITLE STD ☒ Change ☐ Addition
NAME Sautler, Christine E
STREET ADDRESS 407 Tallavana Trl
CITY-ST-ZIP Havana, FL 32333

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James Sautler

James Sautler President 2/10/01

850-539-4715

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)

0016796

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90360 023 *****61.25

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