2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003
Secretary of State

DOCUMENT# N02000001734

Entity Name: WELLSPRING INTERNATIONAL CHURCH, INC.

Current Principal Place of Business:

1801 N. LOCKWOOD RIDGE RD.
SARASOTA, FL 34234

New Principal Place of Business:

4223 ALTON WAY
SARASOTA, FL 34232

Current Mailing Address:

1801 N. LOCKWOOD RIDGE RD.
SARASOTA, FL 34234

New Mailing Address:

4223 ALTON WAY
SARASOTA, FL 34232

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILSON, DAVID R
4223 ALTON WAY
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: WILSON, DAVID R
Address: 4223 ALTON WAY
City-St-Zip: SARASOTA, FL 34232

Title: D ( ) Delete
Name: ADKINS, SETH
Address: P.O. BOX 105
City-St-Zip: SARASOTA, FL 34231

Title: D ( ) Delete
Name: NAWARA, DANIEL D
Address: 1801 N. LOCKWOOD RIDGE RD.
City-St-Zip: SARASOTA, FL 34234

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: BASS, EVAN
Address: 1801 N. LOCKWOOD RIDGE RD.
City-St-Zip: SARASOTA, FL 34234

Title: D ( ) Change (X) Addition
Name: SANDRA, WILSON E
Address: 4223 ALTON WAY
City-St-Zip: SARASOTA, FL 34232

Title: D ( ) Change (X) Addition
Name: ANDREW, WILSON P
Address: 4223 ALTON WAY
City-St-Zip: SARASOTA, FL 34232

Title: D ( ) Change (X) Addition
Name: LINDSEY, WILSON N
Address: 4223 ALTON WAY
City-St-Zip: SARASOTA, FL 34232

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID R. WILSON D 04/30/2003

Electronic Signature of Signing Officer or Director — Date