2000 UNIFORM BUSINESS REPORT (UBR)

FILED May 17, 2000 8:00 am Secretary of State **DOCUMENT # 712742** 1. Entity Name **NEW HORIZONS MINISTRIES, INCORPORATED** 05-17-2000 90939 026 ****61.25 Principal Place of Business Mailing Address 6931 S.W. 68TH COURT 6931 S.W. 68TH COURT S. MIAM! FL 33143 S. MIAMI FL 33143-3121 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 23-7024818 Not Applicable Zip Zip Country Country \$8.75 Additional 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) **GRAVLIN.WALTER** 6931 SW 68TH CT S MIAM! FL 33143 City Zip Code Fl 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 9. Election Campaign Financing FILE NOW: Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees **FEE IS \$61.25** Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PRESIDENT, DIRECTOR - Change Addition TITLE Delete TITLE Vice CR2E037 (9/99 GRAVLIN. VIRGINIA L. NAME NAME L. CAMARGO HBATHER 3182 WILSON ST. STREET ADDRESS STREET ADDRESS 6931 S.W. 68TH CT. CITY-ST-ZIP CITY-ST-ZIF S MIAMI FL YWOOD, FL 33021-444 TITLE TITLE ☐ Change ☐ Addition ☐ Delete GRAVLIN, WALTER: -- -NAME NAME STREET ADDRESS 6931 S.W. 68TH COURT STREET ADDRESS CITY-ST-7IP CITY-ST-7IP S. MIAMI FL TITLE ☐ Delete TITLE Change ☐ Addition MORGAN, JAMES T NAME NAME STREET ADDRESS 10771 SW 47 ST STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP MIAMI FL ☐ Defete ☐ Change ☐ Addition TITLE TITLE ANDERSON, SANDRA NAME STREET ADDRESS 9315 SW 42 ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33165** TITLE ☐ Delete Change ☐ Addition GRESHAM, WAYNE NAME STREET ADDRESS 10040 SW 34 ST STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33165** CITY-ST-ZIP ☐ Delete ☐ Change TITLE TITLE ☐ Addition NAME ONEILL, DEBBIE NAME STREET ADDRESS 12760 SW 19 ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33175** 12. I hereby certify that the information supplied with this fill indicated on this report or supplemental report is true an

of the corporation or the receiver of changed, or on an attachment will SIGNATURĘ

nd does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director by execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if