

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 11, 2001 8:00 am
Secretary of State

05-11-2001 90021 005 ****61.25

DOCUMENT # 712742

1. Entity Name

NEW HORIZONS MINISTRIES, INCORPORATED

Principal Place of Business

6931 S.W. 68TH COURT
S. MIAMI FL 33143
US

Mailing Address

6931 S.W. 68TH COURT
S. MIAMI FL 33143
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7024818

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GRAVLIN, WALTER
6931 SW 68TH CT
S MIAMI FL 33143

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GRAVLIN, VIRGINIA L. 6931 S.W. 68TH CT. S MIAMI FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD GRAVLIN, WALTER 6931 S.W. 68TH COURT S. MIAMI FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORGAN, JAMES T 10771 SW 47 ST MIAMI FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANDERSON, SANDRA 9315 SW 42 ST MIAMI FL 33165	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRESHAM, WAYNE 10040 SW 34 ST MIAMI FL 33165	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ONEILL, DEBBIE 12760 SW 19 ST MIAMI FL 33175	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P. - DIRECTOR HEATHER L. CAMARGO 3182 WILSON ST. Hollywood, FL 33021	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WALTER GRAVLIN
SEC/TREAS

Date

Daytime Phone #

4-24-01 305-6661-6781

CR2E037 (10/00)