## **2000 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

## FILED DOCUMENT # **745917** May 08, 2000 8:00 am Secretary of State 1. Entity Name JIM RUSSO PRISON MINISTRIES, INC. 05-08-2000 90001 014 \*\*\*\*61.25 Principal Place of Business Mailing Address 2106 26TH AVE., E. 2106 26TH AVE., E. **BRADENTON FL 34208** BRADENTON FL 34206-0768 2. Principal Place of Business Mailing Address 768 P.O. Box Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-1881549 Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired .06-076E usa Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) RUSSO, JAMES J 5954 7TH AVE W. **BRADENTON FL 33529** 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 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution, **Department of State** Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE ☐ Delete TITLE NAME BENNETT, JERRY NAME STREET ADDRESS STREET ADDRESS 4701 FAIR DR CITY-ST-ZIP CITY-ST-ZIP VALRICO FL 33594 ☐ Delete TITLE ☐ Addition TITLE Lawrence W. RUSSO, JAMES J. NAME Armbrus NAME STREET ADDRESS STREET ADDRESS 5954 SEVENTH AVENUE, W. CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** Addition TITLE ☐ Delete TITLE ☐ Change STOUT, JOSEPH NAME NAME STREET ADDRESS STREET ADDRESS 7615 VERNA BETHEY RD CITY-ST-ZIP CITY-ST-ZIP MYAKKA CITY FL 34251 ☐ Addition ☐ Change TITLE TD ☐ Delete TITLE HOUSEBERG, EARL NAME NAME STREET ADDRESS 7119 ANTIQUA PLACE STREET ADDRESS CITY-ST-ZIP SARASOTA FL CITY-ST-ZIP SD ☐ Delete TITLE ☐ Change Addition TITLE STOUT, LAURA RUSSO NAME NAME STREET ADDRESS STREET ADDRESS 7615 VERA BETHNEY RD CITY-ST-ZIP CITY-ST-ZIP MYAKKA CITY FL 34251 ☐ Delete ☐ Addition TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 attachme