

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 05, 2003 8:00 am**  
**Secretary of State**

03-05-2003 90071 038 \*\*\*\*70.00

**DOCUMENT # 760423**

1. Entity Name

**DON NORMAN MINISTRIES, INC.**



Principal Place of Business

**GENEVA SPRINGS CONDOMINIUMS  
651 SE 28TH ST #12  
MELROSE FL 32666  
US**

Mailing Address

**P.O. BOX 813  
MELROSE FL 32666  
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 **59-2159630**

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**NORMAND, DONALD O  
GENEVA SPRINGS CONDOMINIUMS  
651 SE 28TH STREET #12  
MELROSE FL 32666**

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. I am familiar with, and accept the obligations of registered agent.

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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD NORMAND, DONALD O GENEVA SPR. CO. 651 SE 28TH ST., #12 MELROSE FL 32666</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD NORMAND, MICHAEL J. 209 SPRINGVIEW CT. WINTER SPRINGS FL 32708</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>STD NORMAND, CYNTHIA B. GENEVA SPR. CO, 651 SE 28TH ST., #12 MELROSE FL 32666</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D KOCKERT, DAVID 3227 NW 24 AVE GAINESVILLE FL</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D RICHMOND, FRANK G. 800 GARDEN ST. KEYSTONE HEIGHTS FL</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:

**Don. O. Normand 3.3.03 352**  
**416.1847**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)

MISSIONS PARTNERS



**DON NORMAND MINISTRIES, INC.**

P.O. BOX 813 • MELROSE, FLORIDA 32666 • USA • (904) 475-1847

Date: March 3<sup>rd</sup>, 2003

TO: Secretary of State  
State of Florida

FROM: Don O. Normand.

RE: Don Normand Ministries, Inc.  
2002 Corporation Annual Report.

There have been no changes in the 2002 Corporation Annual Report for Don Normand Ministries, Inc.

The following officers remain the same.

Normand, Donald O.	P/D
Normand, Michael J.	V/D
Normand, Cynthia B.	S/T/D
Kockert, David	Officer
Richmond, Frank G.	Officer

Please note change of address for,

Frank G. Richmond – Officer  
4225 N.W. 36<sup>th</sup> Street,  
Gainesville, FL 32605

Thank you,

Dr. Don O. Normand  
Geneva Springs Condominiums  
651 SE 28<sup>th</sup> Street #12  
Melrose, FL 32666

Attachment  
#760423

90042713