

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 766080

1. Entity Name

EDGAR BUNDY MINISTRIES, INC.

**FILED**  
**Jan 19, 2000 8:00 am**  
**Secretary of State**

01-19-2000 90182 033 \*\*\*\*61.25

AUUU6666



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

310 W. EVERGREEN ST.  
WHEATON IL 60187

310 W. EVERGREEN ST.  
WHEATON IL 60187-5010  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number  
59-2274537

Applied For  
☒ Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KIRKLAND, SHERYL  
6141 RHYTHM CIRCLE  
ORLANDO FL 32808

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Delete
NAME	BUNDY, EDGAR C.	
STREET ADDRESS	310 W. EVERGREEN ST.	
CITY-ST-ZIP	WHEATON IL	
TITLE	STD	<input type="checkbox"/> Delete
NAME	HARPER, THOMAS R	
STREET ADDRESS	3013 EAST HARDY PLACE	
CITY-ST-ZIP	TUCSON AZ	
TITLE	VD	<input type="checkbox"/> Delete
NAME	WOODS, FORBES	
STREET ADDRESS	603 GREEN HILLS RD	
CITY-ST-ZIP	DUNCANVILLE TX	
TITLE	D	<input type="checkbox"/> Delete
NAME	KIRKLAND, JAMES B	
STREET ADDRESS	6141 RHYTHM CIR.	
CITY-ST-ZIP	ORLANDO FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 attachment with an address, with all other like empowered.

JAN 19 2000

SIGNATURE:

*Edgar C. Bundy, President*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)