## 2003 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT#768006** 

Entity Name: CLEARER VISION MINISTRIES, INC.

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2303 SWEETAIRE CT 220 BRISTOL CIRCLE APOPKA, FL 32712 US SANFORD, FL 32773 US

Current Mailing Address: New Mailing Address:

PO BOX 570268 P.O. BOX 2085

ORLANDO, FL 328570268 SANFORD, FL 327722085 US

FEI Number: 59-2568973 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEWIS, ALBERT L.

201 E. PINE STREET

ORLANDO, FL 32802 US

HEUSLEIN, ROBERT REV.

1017 TAPROOT DRIVE

WINTER SPRINGS, FL 32708 US

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: ROBERT HEUSLEIN 04/30/2003

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: THOMPSON, S L, THOMPSON, S L,

 Name:
 Name:
 THOMPSON, 3 E,

 Address:
 2303 SWEETAIRE CT
 Address:
 220 BRISTOL CIRCLE

 City-St-Zip:
 APOPKA, FL 32712
 City-St-Zip:
 SANFORD, FL 32773

Title: SD ( ) Delete Title: SD (X) Change ( ) Addition Name: TAANYA WHITE, Name: TAANYA WHITE,

Address: 618 FALLSMEAD CIRCLE Address: 123 TEMPLE DRIVE
City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: LONGWOOD, FL 32750

Title: TD ( ) Delete Title: TD (X) Change ( ) Addition Name: THOMPSON, ANN, Name: OVITZ, HAZEL,

Address: 2303 SWEETAIRE CT Address: 401 CONSERVATORY COVE City-St-Zip: APOPKA, FL 32712 City-St-Zip: LAKE MARY, FL 32746

Fitte: VD ( ) Delete Title: VD (X) Change ( ) Addition

( ) Delete Title: Title: (X) Change ( ) Addition THOMPSON, ANN Name: PETERSON, JOAN Name: 220 BRISTOL CIRCLE Address: 6129 MARGIE COURT Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: SANFORD, FL 32773

Title: ( ) Delete Title: D ( ) Change (X) Addition

 Name:
 Name:
 PETERSON, JOAN

 Address:
 Address:
 6129 MARGIE COURT

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32807

Title: ( ) Delete Title: D ( ) Change (X) Addition

 Name:
 Name:
 DAVIES, FAY

 Address:
 Address:
 8406 RIVER BRANCH PLACE

 City-St-Zip:
 City-St-Zip:
 SANFORD, FL 32771

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANN C. THOMPSON VD 04/30/2003