## 2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

## **FILED** Mar 27, 2001 8:00 am<sup>3</sup> Secretary of State **DOCUMENT # 769148** 1. Entity Name LIVING WORD INTERNATIONAL MINISTRIES AND FELLOWS 03-27-2001 90021 038 \*\*\*\*61.25 Principal Place of Business Mailing Address 1291 FOOTE MCCLELLAN RD 1291 FOOTE MCCLELLAN RD COLBERT GA 30628 COLBERT GA 30628 LIS 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 39-1500184 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) RUSHING, CHARLOTTE 4924 STEELDUST LN **LUTZ FL 33549** Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing **\$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. ☐ Addition ☐ Change PD TITLE ☐ Delete TITLE NAME SMITH, ARNOLD P NAME STREET ADDRESS STREET ADDRESS 1291 FOOTE MCCLELLAN RD CITY-ST-ZIP CITY-ST-ZIP COLBERT GA □ Addition Change **VD** ☐ Delete TITLE TITLE NAME NAME SMITH, BETTY J STREET ADDRESS STREET ADDRESS 1291 FOOTE MCCLELLAN RD CITY-ST-ZIP CITY-ST-ZIP COLBERT GA ☐ Addition TITLE Change ☐ Delete TITLE NAME RUSHING, CHARLOTTE NAME STREET ADDRESS STREET ADDRESS 4924 STEELDUST LANE CITY-ST-ZIP CITY-ST-ZIP **LUTZ FL 33549** Change Addition Delete TITLE TIT) F CHANALER, SAMMY CHANDLER, SAMMY NAME 113 SMITH ST. STREET ADDRESS STREET ADDRESS 4562 W MAIN ST CITY-ST-ZIP 38801 TUPELO, MS. CITY-ST-ZIP TUPELO MS 38801 ☐ Change Addition Delete TITLE TITLE NAME NAME DAVIS, DENNIS STREET ADDRESS STREET ADDRESS **503 PIONEER** CITY-ST-ZIP CITY-ST-ZIP SHENANDOAH IO 51601 ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 agreequired by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

Daytime Phone #