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

DOCUMENT # F02000001984

1. Entity Name

THE GOSPEL LIGHTHOUSE PROPHETIC DELIVERANCE MINI STRIES, INCORPORATED



03-27-2003 90107 031 ****70.00

FILED

Mar 27, 2003 8:00 am Secretary of State

Principal Place of Business 804 WEST TURNER ROAD PRICHARD AL 36610 Mailing Address

804 WEST TURNER ROAD PRICHARD AL 36610

2 Principal F	lace of Business Lighthouse P.D.M.	ailing Address 804 WeST TURNER Rd.							
Suite, Apt.	#, etc.	Suit	te, Apt. #, etc.				CHECK HERE	IF MAKING CHAN	GES
City & Stat	hard aL	Pi	18.State	291		New Number	63-1141872	4228319	Applied For Not Applicable
360	10 Country 5,	30	610	Country 5		5. Certificate of	Status Desired	\$8.75 Fee Re	Additional quired
	7. Name and Address of New Registered Agent 1								
MAVERICK SINGLETON , ELDER				Name Her Ma Verick Single ton Street Address (P.O. By Number is Nongceptable) H. M. STE HEM					
	rth Davis Hwy., Ste. #7 Dla fl 32503		5/13 NONHO DAVIS MUY, SIE, #					1E, #1/	
				City	Pe	NSACO	LA	FL Zip	COM 503
	named entity submits this staten	nent for the purpo	se of changing its	stered office o				rida. I am familiar	with, and accept
the obligat	ions of registered agent.	///	11 /L					191	_ 1
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SIGNATURE .	Signature, typed or printed name of registere	and anent and title if annii	cable (N)	Registered Agent signa	ture required :	when reinstation)		DATE	<u></u>
	orgination, typed or printed matrix or registere	au agent and the mappin	Cable: (140 N	Tiegisteled Agent signa	tora reduired	when remistating)	,	DAIL	
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			
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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:

PRICHARD AL 36610

aparte Connelicis Wolf Wood, II

01-06-03 342 24996

(20,01) (20,05)