2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F02000006398

City-St-Zip:

OKLAHOMA CITY, OK 73159

Entity Name: EREFOOM WING MINISTRIES INC

FILED Apr 28, 2003 Secretary of State

Littly Na	ille. I REEDOI	VI VVIING IVIIINISTRIES, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	CANY WAY #10 ⁻ RNE, FL 32940				
Current Mailing Address:			New Mailing Address	s:	
	CANY WAY #10 RNE, FL 32940				
FEI Number	r: 73-1229421	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
MELBOUF	e of Florida.		ourpose of changing its registere	d office or registered agent, or both,	
0,017,710		ic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CP () HOPPER, JACC 320 TUSCANY N MELBOURNE, F	VAY #107	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VCVP () HOPPER, GARY 320 TUSCANY V MELBOURNE, F	VAY #107	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	DST () CHOATE, KIMBI		Title: Name:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: JACQULYN A. HOPPER CP 04/28/2003