2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # F93000002756 Jan 24, 2000 8:00 am Secretary of State 1. Entity Name FEED THE CHILDREN, INC. 01-24-2000 90027 045 ****70.00 Principal Place of Business Mailing Address P.O. BOX 36 P.O. BOX 36 OKLAHOMA CITY OK 73101-0036 OKLAHOMA CITY OK 73101-0036 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FFI Number City & State 73-6108657 Not Applicable \$8.75 Additional Country Zip 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) GEEKER, VAN P 227 SOUTH CALHOUN STREET TALLAHASSEE FL 32301 Zip Code City 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 DATE (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 10. OFFICERS AND DIRECTORS 11. President/Treasurer/Director Change ▼ Addition ☐ Delete TITI F TITLE NAME NAME POWERS, DWIGHT Jones, Larry W. STREET ADDRESS STREET ADDRESS 1300 IRVINE DR. P.O. Box 236 CITY-ST-ZIP CITY-ST-ZIP EDMOND OK 7303<u>4</u> Oklahoma City, OK 73101-0036 ☐ Delete TITLE TITLE Secretary/Director STEVENS, GEORGE Jones, Frances,M. P.O. Box 36 NAME NAME STREET ADDRESS STREET ADDRESS 11716 QUAIL CREEK RD CITY-ST-7IP CITY-ST-ZIP <u> Oklahoma Citv. OK 73101-0036</u> OKLAHOMA CITY OK 73120 ★ Addition Change ☐ Delete TITLE TITLE Espy, Mike NAME NAME GEREN, REBA STREET ADDRESS STREET ADDRESS P.O. Box 24205 IP.O. BOX 32841 N/A CITY-ST-ZIP CITY-ST-ZIP Jackson, MS 39225 oklahoma city ok ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME GEREN, GENE STREET ADDRESS STREET ADDRESS PO BOX 32841 N/A CITY-ST-ZIP CITY-ST-ZIP OKLAHOMA CITY OK ☐ Change ■ Addition VC X Delete TITLE DIFFEE, VIC NAME STREET ADDRESS STREET ADDRESS P.O. BOX A N/A CITY-ST-ZIP CITY-ST-7IP <u>el reno ok</u> Change ☐ Addition ☐ Delete TITLE TITLE NAME Mugg, dan STREET ADDRESS STREET ADDRESS 7200 NW 102ND CITY-ST-ZIP CITY-ST-7IP OKLAHOMA CITY OK 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: SIGNATURE AND PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR U. Jones. President (405) 942-0228

Date Daytime Phone #