2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **F94000004634** Apr 23, 2000 8:00 am Secretary of State ABIDING WORD MINISTRIES INCORPORATED 04-23-2000 90042 047 ****61.25 Principal Place of Business Mailing Address 4300 NICOLS ROAD 3535 BULL RUN CT **EAGAN MN 55122** MELBOURNE FL 32941-0847 2. Principal Place of Business 3. Mailing Address FO BOX 410847 DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 41-1493722 Not Applicable ELBOURNE Country Zip Country **\$8.75** Additional 5. Certificate of Status Desired USA Fee Required 32941-0841 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BARNHART. DAVID Street Address (P.O. Box Number is Not Acceptable BARNHART, DAVID R RIDGE LAKE 3535 BULL RUN CT **MELBOURNE FL 32934** City 2940 1ELBOURNE 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) 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$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. ☐ Addition TITI F TITLE ☐ Delete BARNHART DAVID R 891 RIDGE LAKE DRIVE NAME NAME BARNHART, DAVID R STREET ADDRESS STREET ADDRESS 3535 BULL RUN CT CITY-ST-ZIP MELBOURNE, FL 32940 CITY-ST-ZIP **MELBOURNE FL 32934** Change ☐ Addition STO TITLE STD ☐ Delete TITLE BARNHART, MARYN 891 RIDGE LAKE DRIVE NAME BARNHART, MARY N NAME STREET ADDRESS STREET ADDRESS 3535 BULL RUN CT CITY-ST-ZIP MELBOURNE, FL 32940 CITY-ST-ZIP **MELBOURNE FL 32934** ☐ Change ☐ Addition TITLE D ☐ Delete TITLE NAME GOOD, HERMAN NAME STREET ADDRESS STREET ADDRESS 104 E. AREBA AVENUE CITY-ST-ZIP CITY-ST-ZIP HERSHEY PA 17033 ☐ Change ☐ Addition **VD** ☐ Delete TITLE TITLE NAME BARNHART, RICHARD E NAME STREET ADDRESS STREET ADDRESS 6300 LONGVIEW RD CITY-ST-ZIP CITY-ST-ZIP KANSAS CITY MO 64134 ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

SIGNATURE: NOT TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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

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 eath; 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 light