

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000002303

1. Entity Name

THE SAINTS PRISON MINISTRY, INC.

Principal Place of Business

Mailing Address

235 WEST MAIN STREET  
MOORESTOWN NJ 08057

P.O. BOX 681  
MOORESTOWN NJ 08057-0681

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

22-2907709

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MONROE, W. BRADLEY ESQ.  
239 E. VIRGINIA STREET  
TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PT ☐ Delete  
NAME TANGERT, TODD  
STREET ADDRESS 235 W MAIN ST.  
CITY-ST-ZIP MOORESTOWN NJ 38057

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☐ Delete  
NAME MARTHINS, JEFFERY  
STREET ADDRESS 235 W MAIN ST  
CITY-ST-ZIP MOORESTOWN NJ 08057

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP ☒ Delete  
NAME HEPNER, BILL  
STREET ADDRESS 235 W MAIN ST.  
CITY-ST-ZIP MOORESTOWN NJ

TITLE VICE PRESIDENT ☐ Change ☒ Addition  
NAME GARY F. GILMORE  
STREET ADDRESS Same  
CITY-ST-ZIP

TITLE S ☒ Delete  
NAME HASTIE, GLEN  
STREET ADDRESS 235 W MAIN ST.  
CITY-ST-ZIP MOORESTOWN NJ

TITLE SECRETARY ☐ Change ☒ Addition  
NAME ROBERT GARTOSZ  
STREET ADDRESS Same  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME GLADING, DALE M  
STREET ADDRESS 235 W MAIN ST.  
CITY-ST-ZIP MOORESTOWN NJ 08057

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-00

856-866-9428

Date

Daytime Phone #

CR2E037 (9/99)