

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000002303

1. Entity Name

THE SAINTS PRISON MINISTRY, INC.

Principal Place of Business

235 WEST MAIN STREET
MOORESTOWN NJ 08057

Mailing Address

P.O. BOX 681
MOORESTOWN NJ 08057

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

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

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

7. Name and Address of New Registered Agent-

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

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

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

TITLE VP ☐ Delete
NAME GILMORE, GARY
STREET ADDRESS 235 W MAIN ST.
CITY-ST-ZIP MOORESTOWN NJ

TITLE S ☐ Delete
NAME BARTOSZ, ROBERT
STREET ADDRESS 235 W MAIN ST.
CITY-ST-ZIP MOORESTOWN NJ

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE SECRETARY ☐ Change ☒ Addition
NAME JAMES BUNN
STREET ADDRESS 235 W MAIN ST
CITY-ST-ZIP MOORESTOWN NJ 08057

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

TITLE TREASURER ☒ Change ☐ Addition
NAME BARTOSZ, ROBERT
STREET ADDRESS 235 W MAIN ST
CITY-ST-ZIP MOORESTOWN NJ 08057

TITLE ☐ Change ☐ Addition
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:

Dale M. Glading
Executive Director

4-1-01

856-866-9428

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)