2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F97000000296

Entity Name: VISION MINISTRIES INTERNATIONAL, INC.

FILED May 01, 2002 8:00 AM Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | |
|--|---|----------------------------------|---|--|---------------------------|--------------|
| 5212 N.W. 54 AVE. COCONUT CREEK, FL 33073 | | | | 7654 MARGATE BOULEVARD MARGATE, FL 33064 | | |
| Current M | lailing Addres | s: | New Mail | New Mailing Address: | | |
| 5212 N.W. 54 AVE. COCONUT CREEK, FL 33073 | | | | P.O. BOX 670513 CORAL SPRINGS, FL 33067 | | |
| FEI Number: | : 65-0774446 | FEI Number Applied For() | FEI Number Not App | olicable () | Certificate of Status Des | sired() |
| Name and | I Address of C | urrent Registered Agent: | Name and | d Address of Ne | ew Registered Agen | ıt: |
| | PRE, LEON 54TH AVENUE T CREEK, FL | | | | | |
| | named entity s e of Florida. | submits this statement for the p | ourpose of changing | its registered off | ice or registered age | nt, or both, |
| SIGNATUR | RE: | | | | | |
| | Electron | ic Signature of Registered Age | ent | | Date | |
| OFFICERS AND DIRECTORS: | | | ADDITIO | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | | |
| Title: Name: Address: City-St-Zip: | D () COLLYMORE, 5212 NW 54TH COCONUT CRE | AVENUE | Title: Name: Address: City-St-Zip: | P (X) COLLYMORE, L 5212 NW 54TH A COCONUT CREE | AVENUE | |
| Title: Name: Address: City-St-Zip: | D () COLLYMORE, I 5212 NW 54TH COCONUT CRE | AVENUE | Title: Name: Address: City-St-Zip: | V (X) COLLYMORE, L 5212 NW 54TH A COCONUT CREE | AVENUE | |
| Title: Name: Address: City-St-Zip: | D () ARNETTE, GAR 1955 WATERSI WELLINGTON, | DE CT., EAST | Title: Name: Address: City-St-Zip: | D (X) HARDY, WILLIAI 8074 BUTTONW TAMARAC, FL 3 | OOD CIRCLE | |
| Title: Name: Address: City-St-Zip: | () | Delete | Title: Name: Address: City-St-Zip: | D ()(GARNES, MARV 7654 MARGATE MARGATE, FL 3 | BOULEVARD | |

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.

SIGNATURE: LINDA COLLYMORE VP 05/01/2002