## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # F98000003928

1. Entity Name

## KEN PETTY MINISTRIES INCORPORATED

## **FILED** Apr 10, 2000 8:00 am Secretary of State

04-10-2000 90145 001 \*\*\*\*61.25 04-10-2000 90145 002 \*\*\*\*\*8.75

Principal Plac	ce of Business	Mailing Address							
11546 SPOWART RD. WEST FRANKFORT IL 62896		11546 SPOWART RD. WEST FRANKFORT IL 62896-5017			13462				
2. Principal F	Place of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		-	DO NOT WRITE IN THIS SPACE				
Julie, Apt. #, etc.		Suite, Apt. #, 610.							
City & State		City & State			4. FEI Numb	37-1278324		<u> </u>	plied For t Applicable
Zip Country		Zip Cour		ntry	5. Certificate	of Status Desired		<b>3.75</b> Add e Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
				Name					]
LAWRENCE, ANN			}	Street Addres	s (P.O. Box Numb	er is Not Acceptable	)		
16804 NE SILVER SF	16TH ST. PRINGS FL 34488			Oib		· · · · · · · · · · · · · · · · · ·		Zip Code	
			ļ	City	;	_	FL	Zip 0000	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered	Agent signature requ	ired when reinstating)		DATE		
FILE NOW: FEE IS \$61.25		9. Election Campaign			.00 May Be				
10.	OFFICERS AND DIF	RECTORS	11.		ADDITIONS/CH	ANGES TO OFFICE	RS AND DIRE	CTORS IN	10
TITLE	CP	☐ Delete	TITLE		1			Change	☐ Addition
NAME	PETTY, KENNETH		NAME						
STREET ADDRESS	11546 SPONART RD.		STREE	T ADDRESS	1				
CITY-ST-ZIP	WEST FRANFORT IL 62896		CITY-	ST-ZIP					
TITLE	cv	☐ Delete	TITLE					Change	☐ Addition
NAME	PETTY, JOYCE F		NAME		i				(
STREET ADDRESS	11546 SPONART RD.		STREE	T ADDRESS	1				}
CITY-ST-ZIP	WEST FRANKFORT IL 62896	· · <u></u>	- CITY-	ST-ZIP	·	- 			
TITLE	DS	☐ Delete	TITLE	j				Change	☐ Addition
NAME	TOMER, PAM		NAME		,				
STREET ADDRESS	707 1/2 N. DUQUOIN ST.			T ADDRESS	•				
CITY-ST-ZIP	BENTON IL 62812		CITY-	ST-ZIP					
TITLE	<b>∫</b> Ţ	☐ Delete	TITLE					Change	☐ Addition
NAME	ELY, JENNIFER		NAME		1				
STREET ADDRESS	211 CHESTNUT			T ADDRESS	1				
CITY-ST-ZIP	SESSER IL 62884		CITY-	ST-ZIP					
TITLE	D	☐ Delete	TITLE	,	1			Change	☐ Addition
NAME	PETTY, KEN D		NAME	4	ļ				
STREET ADDRESS	11546 SPOWART RD.			ET ADDRESS	;				
CITY-ST-ZIP	WEST FRANKFORT IL 62896		CITY-	ST-ZIP	<del></del>		<del></del>	<del></del>	
TITLE	}	☐ Delete	TITLE		]		Į.	Change	☐ Addition
NAME			NAME						
STREET ADDRESS	1			T ADDRESS	ı				1
CITY-ST-ZIP			CITY-	ST-ZIP					l

12. I hereby certify that the information supplied with this filling 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.

4/3/00 (618) 435-2895