

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000004705

1. Entity Name

BOB L. PHILLIPS MINISTRIES, INC.

FILED
Apr 20, 2000 8:00 am
Secretary of State

04-20-2000 90063 020 ****61.25

Principal Place of Business

Mailing Address

PO BOX 37247
PENSACOLA FL 32526

PO BOX 37247
PENSACOLA FL 32526-0247

2. Principal Place of Business

3. Mailing Address

17430 Courtney Pine
Suite, Apt. #, etc.

17430 Courtney Pine
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State

Spring TX

Spring TX

4. FEI Number

75-2050178

Applied For

Not Applicable

Zip

Country

Zip

Country

77379

USA

77379

USA

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

PHILLIPS, BOB L
~~2070 DOWNING DR.~~
PENSACOLA FL 32505

Name

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

17430 Courtney Pine Circle

City

Spring

TX FL

Zip Code

77379

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 P
NAME PHILLIPS, BOB L
STREET ADDRESS ~~2070 DOWNING DR.~~ 17430 Courtney Pine
CITY-ST-ZIP PENSACOLA FL 32505 Spring, TX 77379

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S
NAME PHILLIPS, SHERRY
STREET ADDRESS ~~2070 DOWNING DR.~~ 17430 Courtney Pine Circle
CITY-ST-ZIP PENSACOLA FL 32505 Spring, TX 77379

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD
NAME MILLER, BONNIE
STREET ADDRESS 2216 SUNSET BLVD.
CITY-ST-ZIP HOUSTON TX 77005

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD
NAME AUVENSHINE, RON
STREET ADDRESS 111 BLANCROFT
CITY-ST-ZIP SUGAR LAND TX 77478

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE C
NAME KAMPOURIS, EMANUEL
STREET ADDRESS 30 E. 71ST STREET, APT. 5B
CITY-ST-ZIP NEW YORK NY 10021

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME GEISELMAN, J M
STREET ADDRESS ~~2023 MASTERS LANE~~ 3111 Inwood Ct
CITY-ST-ZIP MISSOURI CITY TX 77459 Sugarland, TX 77478

TITLE
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: *Sherry Phillips* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-00

Date

Daytime Phone #

CR2E037 (9/99)