2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F9900000332 1. Entity Name SHEEP SHED MINISTRIES INCORPORATED						03	FILED 03 MAR 10 AM 10: 51			
Principal Place of Business 2820 OAK RIDGE RD W TALLAHASSEE FL 32305			ng Address DAK RIDGE RD W HASSEE FL 32305			SE TABLARY OF STATE TALLARASSEE, FLOATER				
2. Principal	Place of Business	3. Ma	iling Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & Sta	ate	Ci	City & State			4. FEI Number 43-1552164 Applied For Not Applicable				
Zip Country		Zi	Zip		ıntry	5. Certificate of S	tatus Desired	\$8.75 Ad	ditional	
	6. Name and Address of Cur	rent Register	ed Agent			7. Name and Add	iress of New Register			
HADDIC IDA CENE					Name					
HARRIS, IRA GENE 2820 OAK RIDGE ROAD W TALLAHASSEE FL 32305					Street Address	P.O. Box Number is Not Acceptable)				
					City	FL Zip Code				
8. The above the obliga	e named entity submits this statement ations of registered agent.	ent for the purp	ose of changing its	registere	ed office or registe	ered agent, or both, in	the State of Florida. 1 a	am familiar with,	, and accept	
SIGNATURE	Signature, typed or printed name of registered	agent and title if age	licable (NOTE	· Aenistere	d Agent signature require	arl when rejectation	DAT		-	
FILE NOW: FEE IS \$61.25			9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State				
10.	OFFICERS AND	DIRECTORS		11.		ADDITIONS/CHANG	ES TO OFFICERS AND	DIRECTORS IN	√ 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD HARRIS, IRA GENE 2820 OAKRIDGE ROAD W TALLAHASSEE FL 32305		☐ Delete		i		014035 01034007		Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCST HARRIS, DANA 2820 OAKRIDGE ROAD W TALLAHASSEE FL 32305		☐ Delete					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRIS, PAUL 11307 N. NASHUA DR KANSAS CITY MO 64155		☐ Delete					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRIS, DANA 2820 OAKRIDGE ROAD W TALLAHASSEE FL 32305		☐ Delete	TITLE NAME STREE	T ADDRESS			☐ Change	Addition	
TITLE Name Street address City-St-Zip			☐ Delete	TITLE NAME STREE	T ADDRESS	-	70	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	pertify that the information supplied on this report or supplemental repo	with the Cir	□ Delete	CITY-		,		☐ Change	Addition	

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:

OCHATCHARLDEODANADHARRIS

850-210-0449