

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000003105

1. Entity Name

WILLIE NAULLS MINISTRIES, INCORPORATED

FILED
Apr 13, 2000 8:00 am
Secretary of State

04-13-2000 90018 036 ****61.25

Principal Place of Business 31096 FLYING CLOUD DRIVE LAGUNA NIGUEL CA 92677-2714	Mailing Address 31096 FLYING CLOUD DRIVE LAGUNA NIGUEL CA 92677-2714
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

4. FEI Number 95-4413958	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NAULLS, WILLIAM D
 9330 SW 46TH PLACE
 GAINESVILLE FL 32608-7111

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 NAME STREET ADDRESS CITY-ST-ZIP	PD NAULLS, WILLIAM D 9330 SW 46TH PLACE GAINESVILLE FL 32608-7111	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD WOODY, ROBERT L 249 WEST UNIVERSITY AVENUE GAINESVILLE FL 32601	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD NAULLS, ANNE V 9330 SW 46TH PLACE GAINESVILLE FL 32608-7111	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRIER, ROOSEVELT 31096 FLYING CLOUD DRIVE LAGUNA NIGUEL CA 92677-2714	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HICKER, GEORGE 31096 FLYING CLOUD DRIVE LAGUNA NIGUEL CA 92677-2714	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Landry, Allen J. 31096 Flying Cloud Drive Laguna Niguel, CA 92677-2714	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Millett, John W. 31096 Flying Cloud Drive Laguna Niguel, CA 92677-2714	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Pickens, Thomas, Jr. 31096 Flying Cloud Drive Laguna Niguel, CA 92677-2714	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Thomas, Marvin L. 31096 Flying Cloud Drive Laguna Niguel, CA 92677-2714	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: William D. Naulls 4/7/00 (352) 367-9638
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)