

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 05, 2001 8:00 am**  
**Secretary of State**

0088836

**DOCUMENT # F99000003105**

1. Entity Name

**WILLIE NAULLS MINISTRIES, INCORPORATED**

04-05-2001 90067 032 \*\*\*\*61.25

Principal Place of Business

Mailing Address

31096 FLYING CLOUD DRIVE  
 LAGUNA NIGUEL CA 92677-2714

31096 FLYING CLOUD DRIVE  
 LAGUNA NIGUEL CA 92677-2714

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

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired.

**\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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 \_\_\_\_\_

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

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:** *Signature Required* William D. Naulls 27 March 2001 (352) 367-9638

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)