

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000016083

FILED  
Sep 25, 2002  
Secretary of State

**Entity Name:** CHRISTIAN MILLENNIUM GROUP INVESTMENTS LLC

**Current Principal Place of Business:**

510 NORTH CARPENTER ROAD  
TITUSVILLE, FL 32796

**New Principal Place of Business:**

PO BOX 189  
TITUSVILLE, FL 3278 US

**Current Mailing Address:**

P.O. BOX 189  
TITUSVILLE, FL 32781

**New Mailing Address:**

P.O. BOX 189  
TITUSVILLE, FL 32781 US

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GAVIN, LAURIE L  
510 NORTH CARPENTER ROAD  
TITUSVILLE, FL 32796 US

**Name and Address of New Registered Agent:**

GAVIN, LAURIE L  
PO BOX 189  
TITUSVILLE, FL 32781 US

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:

09/25/2002

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: GAVIN, THOMAS H PASTOR  
Address: PO BOX 189  
City-St-Zip: TITUSVILLE, FL 32781 US

Title: MGR ( ) Change (X) Addition  
Name: GAVIN, LAURIE L PASTOR  
Address: PO BOX 189  
City-St-Zip: TITUSVILLE, FL 32781 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LAURIE GAVIN

RA

09/25/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date