2000 UNIFORM BUSINESS REPORT (UBR)

				<u> </u>						
DOCUMENT # L9800000331 1. Entity Name GOOD TIDINGS I, L.C.						FILED SECRETARY OF STATE DIVISION OF CORPORATIONS				
						00 JUN 31	D PM I:	: 29		
Principal Place of Business Mailing Address						,				
5344 GAULEY RIVER DRIVE 5344 GAULEY RIVER DRIVE								-nf		
STONE MOUNTAIN GA 33087 STONE MOUNTAIN GA 30087-2101						•		()		
2. Principal P	lace of Business	3. Mailing Address	Mailing Address			(II ar iii ba iii ba i			
0 " 1 .		Orito Act # ctc	Cuito Apt # oto			. DO NOT MOIT	·	MOF		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & Stat	θ	City & State	City & State			4. FEI Number Applied For Not Applied For Not Applicable				
Zip Country		· ~Zip	Cour	ntry for fits	5. Certificate of Status Desired 55.00 Additional Fee Required					
	6. Name and Address of Curre	ent Registered Agent			7. Nam	e and Address of New R				
Name										
BARTH, JA	Street Address (P.O. Box Number is Not Acceptable)									
30 SOUTH SHORE DRIVE DESTIN FL 32541										
DESTRATE 02341			City				FL	Zip Cod	le	
8. The above named entity submits this statement for the purpose of changing its regis				<u> </u>	rL '					
8. The above	named entity submits this statemen	t for the purpose of changing its	register	ed office or registere	ed agent,	or both, in the State of Flo	rida.			
SIGNATURE .	118.23									
	Signature, typed or printed name of registered as	jent and title if applicable. (NOT)	E: Registere	d Agent signature required	when reinstat	ing)	DATE			
aught and the File now!!! I				•				•		
	1238	Make Check Pa	yable t	o Department of	i State					
9.	MANAGING ME	L MBERS/MEMBERS	10.	·		ADDITIONS/	CHANGES			
ШП	MGRM	☐ Celete	TITL	•		 .	ĺ	Change	Addition	
NAME STREET ADDRESS	GOSS, EDWARD M JR 5344 GAULEY RIVER DRIVE		MAN STRI	EE AODRESS		400<u>0</u>003 5	1142	74 -	<u>.</u> -2	
CITY- 2T- ZIP	STONE MOUNTAIN GA 30087	•		- 8T- ZIP		******	5.000 n *	****5	0.00	
TITLE	MGRM	☐ Deleta	TITL			: .		Change	Addition	
RAME STREET ADDRESS	GOSS, SHIRLEY B 5344 GAULEY RIVER DRIVE	,	MAM 218	EET ADORESS					ļ	
CITY-ST-ZIP	STONE MOUNTAIN GA 30087	e calculation and the		-81-2IP	مندرست م	محريرة وجسماء	سنبست	* 1,500	ازرمیشطیستان. ا	
TITLE	MGRM _	☐ Deleta	TĪŢLL	~ >~ -~		utuma a santa :	اء جو جو ديد	Change	- 🗌 Addition -	
NAME	COWLEY-RON 149 KATYDID LANE		NAM STR	E ET ADDRESS						
CITY-81-71P	MURRYVILLE GA 30564			-8T-ZIP						
TITLE	MGRM	□ Doleto	MI					Change	Addition	
NAME STREET AUDRESS	COWLEY, MARCELLA 149 KATYDID LANE	,	MAM Stri	E ET ADDRESS	•	9 ·				
CITY-ST-ZIP	MURRYVILLE GA 30564	* *		- ST- ZIP		·				
TITLE	MGRM	☐ Delete	TITL					Change	Addition	
MAME STREET ADDRESS	STROUP, DAVID G JR 736 EAGLE MILL COURT		NAM ATRI	EET ADDRESS	(
CITY-8T-ZIP	MARIETTA GA 30068	•		-ST-ZIP						
ாழ்	MGRM	☐ Delete	TITL				1	Change	Additton	
LALAGE STREET ADDRESS	MATHIS, E J TRUSTEE 550 CRABAPPLE LANE		RAM Stri	IE EET ADDRESS		ч				
CITY-ST-ZIP	ARDEN NC 28704			- 81- ZIP		•				
11. I hereby o	certify that the information supplied on this report is true and accurate a	with this filing does not qualify fo	r the exe	mption stated in Se	ction 119.	07(3)(i), Florida Statutes. I	further certif	y that the ir	nformation er of the	
limited lia	bility company or the receiver or tru	stee empowered to execute this	report as	s required by Chapt	er 608, Flo	orida Statutes.	9		5. 5.5	
	Flut 5	m Sonhow	1000			4/20/60	770	938.	-2035	
SIGNAT		PRINTED NAME OF SKINING MANAGING	MEMBER	OR MANAGER		Date		time Phone #		