

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000002973

1. Entity Name

NEW WINE MINISTRIES, INC.

Principal Place of Business

618 SOUTHEAST 20TH PLACE
CAPE CORAL FL 33990

Mailing Address

618 SOUTHEAST 20TH PLACE
CAPE CORAL FL 33990

2. Principal Place of Business

903 PONDELLA ROAD

3. Mailing Address

903 PONDELLA ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

NORTH FORT MYERS, FL

City & State

NORTH FORT MYERS, FL

Zip

33903

Country

USA

Zip

33903

Country

USA

4. FEI Number

65-1004049

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

HARRY A. BLAIR, ATTY

Street Address (P.O. Box Number is Not Acceptable)

2180 WEST FIRST STREET

SUITE 401

City

FORT MYERS

FL

Zip Code

33901

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

HARRY A. BLAIR

Harry Blair

5.18.01

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

TITLE P ☐ Delete
NAME ROGERS, STEVEN L
STREET ADDRESS 618 SOUTHEAST 20TH PLACE
CITY-ST-ZIP CAPE CORAL FL 33990

TITLE SD ☒ Delete
NAME ZIMMERLY, PAMELA R
STREET ADDRESS 618 SOUTHEAST 20TH PLACE
CITY-ST-ZIP CAPE CORAL FL 33990

TITLE TD ☒ Delete
NAME GERL, MATTHEW B
STREET ADDRESS 618 SOUTHEAST 20TH PLACE
CITY-ST-ZIP CAPE CORAL FL 33990

TITLE D ☒ Delete
NAME GEERSON, WALTER
STREET ADDRESS 618 SOUTHEAST 20TH PLACE
CITY-ST-ZIP CAPE CORAL FL 33990

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P D ☒ Change ☐ Addition
NAME ROGERS, STEVEN L.
STREET ADDRESS 618 SE 20TH PLACE
CITY-ST-ZIP CAPE CORAL, FL 33990

TITLE STD ☐ Change ☒ Addition
NAME TANA L. ROGERS
STREET ADDRESS 618 SE 20TH PLACE
CITY-ST-ZIP CAPE CORAL, FL 33990

TITLE P ☐ Change ☒ Addition
NAME JAMIE L. ROGERS
STREET ADDRESS 306 EAST OAK AVE.
CITY-ST-ZIP TAMPA, FL 33602

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

Harry Blair REQUIRED

5.18.01

941.652.4125

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90039 046 ****61.25

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DO NOT WRITE IN THIS SPACE

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