

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 24, 2001 8:00 am  
Secretary of State

04-24-2001 90299 003 \*\*\*\*61.25

DOCUMENT # N00000004022

1. Entity Name

UNVEILED GLORY MINISTRIES, INC.

Principal Place of Business

1107 FINCK ROAD  
NICEVILLE FL 32578

Mailing Address

1107 FINCK ROAD  
NICEVILLE FL 32578

2. Principal Place of Business

418 harkspur Ct

Suite, Apt. #, etc.

3. Mailing Address

418 harkspur Ct

Suite, Apt. #, etc.

City & State

Niceville FL

City & State

Niceville FL

4. FEI Number

EIN 59-3653565

Applied For

Not Applicable

Zip

32578

Country

USA

Zip

32578

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

WOOD, SONYA  
1107 FINCK ROAD  
NICEVILLE FL 32578

7. Name and Address of New Registered Agent

Name

Terry Wood

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

418 harkspur Ct

City

Niceville

FL

Zip Code

32578

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

*Terry Wood* PD

Terry C Wood

4/15/2001

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 PD  
NAME WOOD, TERRY  
STREET ADDRESS 418 LARKSPUR COURT  
CITY-ST-ZIP NICEVILLE FL 32578 ☐ Delete

TITLE VD  
NAME WOOD, KEVIN  
STREET ADDRESS 1107 FINCK ROAD  
CITY-ST-ZIP NICEVILLE FL 32578 ☐ Delete

TITLE STD  
NAME WOOD, SONYA  
STREET ADDRESS 1107 FINCK ROAD  
CITY-ST-ZIP NICEVILLE FL 32578 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE VD  
NAME WOOD Kevin  
STREET ADDRESS 6413 Derby DR  
CITY-ST-ZIP Bakersfield CA 93306 ☒ Change ☐ Addition

TITLE STD  
NAME WOOD Sonya  
STREET ADDRESS 6413 Derby DR  
CITY-ST-ZIP Bakersfield CA 93306 ☒ Change ☐ Addition

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

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

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

*Terry C Wood* PD

TERRY C WOOD 4/15/2001 850-882-8486 3211

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)