

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2001 8:00 am
Secretary of State

01-24-2001 90019 009 ****70.00

DOCUMENT # N00000004361

1. Entity Name

B ENCOURAGED FREEDOM MINISTRIES, INC.

Principal Place of Business

**4102 MEREDITH DRIVE
 VALRICO FL 33594**

Mailing Address

**4102 MEREDITH DRIVE
 VALRICO FL 33594**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

593655855

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**TRENT, ELIZABETH L
 4102 MEREDITH DRIVE
 VALRICO FL 33594**

7. Name and Address of New Registered Agent

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

TITLE **D** ☐ Delete
 NAME **TRENT, ELIZABETH L**
 STREET ADDRESS **4102 MEREDITH DRIVE**
 CITY-ST-ZIP **VALRICO FL 33594**

TITLE **D** ☐ Delete
 NAME **HERZ, JANET S**
 STREET ADDRESS **4102 MEREDITH DRIVE**
 CITY-ST-ZIP **VALRICO FL 33594**

TITLE **D** ☐ Delete
 NAME **TUCKER, RONALD W II**
 STREET ADDRESS **2208 HERNDON STREET**
 CITY-ST-ZIP **DOVER FL 33527**

TITLE **D** ☐ Delete
 NAME **TUCKER, WINDY L**
 STREET ADDRESS **2208 HERNDON STREET**
 CITY-ST-ZIP **DOVER FL 33527**

TITLE **D** ☐ Delete
 NAME **BRANDON, CHANDRA**
 STREET ADDRESS **6413 CRYSTAL BROOK DRIVE**
 CITY-ST-ZIP **TAMPA FL 33625**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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 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:

ELIZABETH L. TRENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/11/01 813 653 2757

CR2E037 (10/00)