2001 UNIFORM BUSINESS REPORT (UBR)

May 18, 2001 8:00 am DOCUMENT # N0000004833 Secretary of State 1. Entity Name 05-18-2001 91243 007 ****70.62 TELIM INTERNATIONAL MINISTRIES, INC. Principal Place of Business Mailing Address 437 MERCURY DRIVE 437 MERCURY DRIVE TALLAHASSEE FL 32310 TALLAHASSEE FL 32310 2. Principal Place of Business 3. Mailing Address 437 MERCULA Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number allahassee lahassee Not Applicable Country \$8.75 Additional Certificate of Status Desired 32310 eon 3*231*0 eon Fee Required 6. Name and Address of Current Registered Agent 7... Name and Address of New Registered Agent Name Street Address (P.Q. Box Number is Not Acceptable) SMITH, ZELLENE W REV. 437 MERCURY DRIVE TALLAHASSEE FL 32310 Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be П Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Zelleve W. Smith ☐ Addition TITLE TITLE Change NAME NAME DiRector Dastor STREET ADDRESS STREET ADDRESS 437 MERCULY DE TACK 1-2. CITY-ST-7IP CITY-ST-ZIP Janie hightburn Delete SECRETURY TREASURER TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS 437 MERCURY DR. TOIL FL CITY-ST-ZIP CITY-ST-ZIP FRED D. PAYNE TITLE Change ☐ Addition TITLE □ Delete NAME Business manager NAME STREET ADDRESS STREET ADDRESS 437 MERCULY DR. TAH, FR CITY-ST-ZIP CITY-ST-ZIP Per Vernice y Gibson Delete Assistant DiAector ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 431 MEXCURY OR. TACK FR CITY-ST-ZIP CITY-ST-ZIP STERLING Smith ☐ Change ☐ Addition TITLE TITLE NAME NAME Board member STREET ADDRESS STREET ADDRESS MERCULY DR. TALL CITY-ST-ZIP CITY-ST-ZIP CAROL. SCUTT TITLE TITI F Change Addition NAME NAME Board member STREET ADDRESS STREET ADDRESS CITY-ST-7IP 137 MERCULY DR. 79/1, 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: KING CYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 13, 2001 574-9963