

6/14/

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Jul 02, 2001 8:00 am
Secretary of State

06-14-2001 90007 002 ****61.25

DOCUMENT # N00000005561

1. Entity Name

TRUMPET IN ZION MINISTRIES, INC.

Principal Place of Business

1962 58TH ST. N.
CLEARWATER FL 33760

Mailing Address

1962 58TH ST. N.
CLEARWATER FL 33760

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

1289-3667484

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fees Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

BEHN, BETTY J
1962 58TH ST. N.
CLEARWATER FL 33760

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 \$61.259. 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 ☐ Delete
NAME BEHN, BETTY J
STREET ADDRESS 1962 58TH ST. N.
CITY-ST-ZIP CLEARWATER FL 33760 DTITLE V ☐ Delete
NAME ANDERSON, DANIEL
STREET ADDRESS 1530 W. LAUREL ST.
CITY-ST-ZIP TAMPA FL 33607 DTITLE ST ☐ Delete
NAME BRAUD, PATRICIA
STREET ADDRESS 1111 E. 109TH AVE.
CITY-ST-ZIP TAMPA FL 33612 DTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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 IIRs empowered.

SIGNATURE: *Betty J Behn*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

787-539-6211