

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000005678

1. Entity Name

CHRISTIAN LIFE MINISTRIES OF BREVARD, INC.

FILED
Mar 06, 2002 8:00 am
Secretary of State

03-06-2002 90014 032 *****61.25

Principal Place of Business

C/O REV. JOHN HORTON
330 GRANT AVENUE
SATELLITE BEACH FL 32937

Mailing Address

C/O REV. JOHN HORTON
330 GRANT AVENUE
SATELLITE BEACH FL 32937

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

59-3665651

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HORTON, JOHN REV.
330 GRANT AVENUE
SATELLITE BEACH FL 32937

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DIR
NAME SAVAGE, LEA ANN DIRECTO
STREET ADDRESS 316 JUPITER DRIVE
CITY-ST-ZIP SATELLITE BEACH FL 32937 ☐ Delete

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

TITLE DIR
NAME ROSS, KATHLEEN DIRECTO
STREET ADDRESS 250 WILSON AVE
CITY-ST-ZIP SATELLITE BEACH FL 32937 ☐ Delete

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

TITLE DIR
NAME WHIPPO, JEFF DIRECTO
STREET ADDRESS 745 ATLANTIC DRIVE
CITY-ST-ZIP SATELLITE BEACH FL 32937 ☐ Delete

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

TITLE DIR
NAME BERNAT, JOHN DIRECTO
STREET ADDRESS 285 WILSON AVE
CITY-ST-ZIP SATELLITE BEACH FL 32937 ☐ Delete

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

TITLE DIR
NAME GRIFFIN, JOHN DIRECTO
STREET ADDRESS 538 W. AMHERST CIRCLE
CITY-ST-ZIP SATELLITE BEACH FL 32937 ☐ Delete

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

TITLE OFF.
NAME HORTON, SHARON K OFFICER
STREET ADDRESS 330 GRANT AVENUE
CITY-ST-ZIP SATELLITE BEACH FL 32937 ☐ Delete

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:

John G. Horton

2/23/02

321-729-2716

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)

Attachment

DOC#N000000005678/507869

