FILED

Jul 28, 2003 8:00 am Secretary of State

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N0000005718

1. Entity Name

| LIVING W | ord eval | NGELICAL MINISTRY | 07 | -28-2003 90149 012 ***** | ™61. <i>2</i> 3 |) | | | |
|---|--|--|---|---|--|---|-----------------------------------|-------------------------------|------------------------------|
| Principal Place of Business 7518 LAUREL HILL DRIVE ORLANDO FL 32818 | | | Mailing Address 7518 LAUREL HILL DRIVE ORLANDO FL 32818 | | | | | | |
| 2. Principal P | Place of Busin | ess | 3. Mailing Address | | | | | | |
| Suite, Apt. #, etc. | | | Suite; Apt. #, etc. | | | ☐ CHECK HERE IF MAKING CHANGES | | | |
| City & State | | | City & State | | | 4. FEI Number 59-3738372 | | Applied For Not Applicable | |
| Zip | | Country | Zip | Country | | 5. Certificate of Sta | tus Desired | 5 Addi | |
| 6. Name and Address of Current Re | | | | <u> </u> | | 7. Name and Addr | ess of New Registered Agent | | |
| | | | | Name | GE | NEVA I | T. BARTLEY | / | |
| BARTLEY, GENEVA T 46 SO. NORMANDALE AVENUE | | | | | Street Address (BO. Box Number is Not Acceptable) DRIVE | | | | |
| ORLANDO FL 32835 | | | | | <u>, , , , , , , , , , , , , , , , , , , </u> | -1101.0 | | | |
| | | | | City | ORL | ANDO | FL Zi | 328 | 18 |
| | named entity | | the purpose of changing its | registered office | | | he State of Florida. I am familia | r with, a | nd accept |
| ** | | | | | | | | | l |
| SIGNATURE . | Signature, typed | or printed name of registered agent ar | nd title if applicable. (NOTE | : Registered Agent sign | ature required | when reinstating) | DATE | | |
| FILE NOW: FEE IS \$61.25 After September 10, 2003, min will be \$236.25 9. Election Campaign For Trust Fund Contribut | | | | | | \$5.00 May Be Added to Fees Make Check Payable to Florida Department of State | | | |
| 10. | | OFFICERS AND DIRE | | 11. | | | | | |
| TITLE | PDT | | | | | | S TO OFFICERS AND DIRECTO | RS IN | 0 |
| NAME | BARTLEY, | LEDOV I | | TITLE | | ADDITIONS/CHANGE | S TO OFFICERS AND DIRECTO | | O Addition |
| STREET ADDRESS | AR S NOR | LENOIL | ☐ Delete | | | ADDITIONS/CHANGE | | | |
| CITY-ST-ZIP | | Mandale ave | | TITLE | | DDITIONS/CHANGE | | | |
| | ORLANDO | Mandale ave | | TITLE NAME | | LADDITIONS/CHANGE | | | |
| TITLE | ORLANDO VPTS | MANDALE AVE FL 32835 | | TITLE NAME STREET ADDRESS | | LADDITIONS/CHANGE | | nange | |
| NAME | ORLANDO VPTS BARTLEY, | MANDALE AVE FL 32835 GENEVA T | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | | LADDITIONS/CHANGE | ci | nange | Addition |
| | ORLANDO VPTS BARTLEY, 46, S, NOR | MANDALE AVE FL 32835 GENEVA T MANDALE AVE | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | | ADDITIONS/CHANGE | ci | nange | Addition |
| NAME STREET ADDRESS | ORLANDO VPTS BARTLEY, 46 S NOR ORLANDO DT | MANDALE AVE FL 32835 GENEVA T MANDALE AVE FL 32835 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | | ADDITIONS/CHANGE | ci | nange | Addition |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | ORLANDO VPTS BARTLEY, 46,S,NOR ORLANDO DT HICKS, RE | MANDALE AVE FL 32835 GENEVA T MANDALE AVE FL 32835 GINALD D | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | | ADDITIONS/CHANGE | CI | nange | ☐ Addition |
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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 optowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

7/23/03

Deutimo Phone #