

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000005803

1. Entity Name

EFFECTIVE FATHER MINISTRIES, INC.

Principal Place of Business

1750 UNIVERSITY DRIVE
SUITE 214
CORAL SPRINGS FL 33071

Mailing Address

644 SOUTHEAST 4TH AVENUE
FORT LAUDERDALE FL 33301-3102

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

HODGES, PERRY W JR
644 SOUTHEAST 4TH AVENUE
FORT LAUDERDALE FL 33301-3102

4. FEI Number

65-1038783

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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
P/O
JOHN K. REAM
7720 VENTURA LANE
PARKLAND, FL 33067

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
V/O
RITA M. REAM
7720 VENTURA LANE
PARKLAND, FL 33067

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
S/T/D
CLINTON R. CHURCHILL
8536 SHADOW COURT
CORAL SPRINGS, FL 33071

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ROBERT APPLGATE
7060 N.W. 20TH STREET
FT. LAUDERDALE, FL 33313

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WILLIAM HANIFIN
5011 N.E. 23RD AVE
LIGHTHOUSE POINT, FL 33064

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DAVID GODUTI
4991 KINGSTON WAY
NAPLES, FL 34119

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: CLINTON R. CHURCHILL 4/11/01 (954) 341-5088
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90172 020 *****70.00



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)