

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

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90138 042 ****61.25

DOCUMENT # **N00000006875**



1. Entity Name
WORLDWIDE CHRISTIAN SINGERS, INC.

Principal Place of Business
**100 INTERNATIONAL PARKWAY STE 122
HEALTHROW FL 32746**

Mailing Address
**100 INTERNATIONAL PARKWAY STE 122
HEALTHROW FL 32746**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
323 Palm Dr.

3. Mailing Address
323 Palm Dr.

Suite, Apt. #, etc.

City & State
Flagler Beach, FL

City & State
Flagler Beach, FL

Zip
32136

Country
USA

Zip
32136

Country
USA

4. FEI Number **59-3725423**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

ARNETTE, V GLENN III
100 INTERNATIONAL PARKWAY STE 122
HEALTHROW FL 32746

7. Name and Address of New Registered Agent

Name

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

City
Flagler Beach

State
FL

Zip Code
32136

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *V Glenn Arnette III* DATE **2/6/03**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ARNETTE, V GLENN III 317 SOUTH SPAULDING COVE HEALTHROW FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV ARNETTE, SHANNON P 317 SOUTH SPAULDING COVE HEALTHROW FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SISTI, EDWARD A 2018 BURLINGTON DR E DELTONA FL 32725
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT DOUGHERTY, PATRICIA A 390 PALM DRIVE FLAGLER BEACH FL 32136
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUTHRIE, JAMES E 2440 CAROL WOODS WAY APOPKA FL 32712
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *V Glenn Arnette III* DATE: **2/6/03** ID: **4016209592**

CR2E037 (10/02)