2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State
04-16-2002 90140 042 ****61.25

DOCUMENT # N00000007784

1. Entity Name

CHARI MINISTRY, INC.

Principal Place of Business	Mailing Address
1116 LOBLOLLY LANE PORT ORANGE FL 32119	1116 LOBLOLLY LANE PORT ORANGE FL 32119

32456

DO NOT WRITE IN THIS SPACE

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 59-3685546 ☐ 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
FITZPATRICK, RONALD M 1116 LOBLOLLY LANE PORT ORANGE FL 32119	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 Ronald M. Fitzpatrick Ronald M. Fitzpatrick 5/1/02
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D FITZPATRICK, RONALD M 1116 LOBLOLLY LANE PORT ORANGE FL 32119	☐ Delete President	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	P ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RICE, STEVE<br~~11 CEDAR STREET~~<br~~PORT ORANGE FL 32127~~	☐ Delete Vice President	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	VP Rice, Steve 1885 SECLUSION DRIVE DAYTONA BEACH, FL 32124 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FITAPATRICK, SUSAN J 1116 LOBLOLLY LANE PORT ORANGE FL 32119	☐ Delete Secretary	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	S ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	T PATERNITI, EDWARD D 1301 ANTRIM CIRCLE ORMOND BEACH, FL 32174 Treasurer ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	LARRY KELLY JR 784 STERLING CHASE DR PORT ORANGE, FLA 32127 Director ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/01)

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: Ronald M. Fitzpatrick D Ronald M. Fitzpatrick 4/1/02 (386) 304-1162
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #