2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N0000007972

1. Entity Name

SOUTH MARION MINISTERS ASSOCIATION, INC.

2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	

FILED
May 22, 2001 8:00 am
Secretary of State
05-05-2001 90369 034 ****61.25 5/5/

Principal Plac	e of Business	Mailing Address							
50 WATER TRACK DRIIVE OCALA FL 34472		50 WATER TRACK DRIIVE OCALA FL 34472							
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2. Principa! P	ace of Business	3. Mailing Address							
Suite, Apt. #, etc. City & State Zip Country		Suite, Apt. #, etc. City & State Zip Country		DO NOT WRITE IN THIS SPACE					
					4. FEI Number	7843		Applied For Not Applicable	
				ntry				8.75 Add	Additional
	6. Name and Address of Current Re	gistered Agent			7. Name and A	ddress of New F			<u> </u>
				Name			-		
	IS, RAYMOND C VATER TRACK DRIIVE		Street Addres		s (P.O. Box Number	is Not Acceptabl	e)	_ 	
	LA FL 34472		Ì						
	•		ŀ	City			FL	Zip Cod	e
. The above	named entity submits this statement for t	he purpose of changing its	registere	d office or regis	tered agent, or both	, in the state of Flo	orida.	<u> </u>	
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SIGNIATING									
SIGNATURE .	Signature, typed or prated name of registered agent and	title if applicable. (NOTE	: Registered	Agent signature requ	ired when reinstating)		DATE		
					I				
	FILE NOW:	9. Election Campaign		+-	.00 May Be		e Check P		•
	FILE NOW: FEE IS \$61.25	Election Campaign Trust Fund Contribution		+-	.00 May Be ded to Fees		e Check Pepartment		•
0.		Trust Fund Contribu		+-		De	partment	of State	
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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.