

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000008038

1. Entity Name

ZENNAH MINISTRIES, INC.

1A

FILED  
Aug 21, 2001 8:00 am  
Secretary of State

08-21-2001 90004 050 \*\*\*\*61.25

0014173

Principal Place of Business  
5123 50TH AVE W  
BRADENTON FL 34210

Mailing Address

5123 50TH AVE W  
BRADENTON FL 34210

2. Principal Place of Business

3. Mailing Address

P.O. BOX 1235

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Holmes Beach FL

City & State

City & State

Zip

Zip

34218

Country

4. FEI Number

65-0928734

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

Name

KAISER, KATRINA  
5123 50TH AVE W  
BRADENTON FL 34210

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

After September 12, 2001, min. will be \$236.25

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

CR2E037 (5/01)

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KAISER, KATRINA 5123 50TH AVE W BRADENTON FL 34210	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LEO KAISER, JOHN 101 NEENAN LN ORANGE CT 06477	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition John L. Kaiser 5123 50th Ave West Bradenton, FL 34210
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS PITTMAN, SHARON 211 66TH ST HOLMES BEACH FL 34217	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT CAMPORA, CARMELLA 921 FAITH CIR E #72 BRADENTON FL 34202	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition CAMPORA, CARMELLA 4212 53RD Ave W. #2006 Bradenton, FL 34210
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	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"/> Delete	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: *K. Kaiser*

8/17/01 941-756-8285