2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 30, 2001 08:00 AM N00000008073 DOCUMENT # 1. Entity Name **Secretary of State** M.O.R.E. MINISTRIES, INC. Principal Place of Business Mailing Address 2120 58TH AVE STE 147 4126 57TH AVE VERO BEACH FL VERO BEACH 32966 32966 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1040614 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NELSON CAROLYN T Street Address (P.O. Box Number is Not Acceptable) 4126 57TH AVE VERO BEACH FL32966 City 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. 04/30/2001 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: Make Check Payable to **\$5.00** May Be FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete ST TITLE STD Change ☐ Addition NAME NAME NELSON JAMES NELSON JAMES STREET ADDRESS STREET ADDRESS 4126 57TH AVE 4126 57TH AVE CITY-ST-ZIP CITY-ST-ZIP VERO BEACH VERO BEACH 32966 FT. 32966 TITLE ☐ Delete TITLE VD. X Change ☐ Addition NAME RROWN DONALD TR NAME BROWN DONALD .TR STREET ADDRESS STREET ADDRESS 4126 57TH AVE 4156 57TH AVE CITY-ST-ZIP VERO BEACH FL. 32966 CITY-ST-ZIP VERO BEACH FL. 32966 TITLE Delete TITLE PD X Change ☐ Addition NAME NELSON CAROLYN NAME NELSON CAROLYN STREET ADDRESS STREET ADDRESS 4126 57TH AVE 4126 57TH AVE CITY-ST-ZIP VERO BEACH CITY-ST-ZIP VERO BEACH FL. 32966 FT. 32966 TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE Change 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.

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE: _

NAME

STREET ADDRESS

CITY-ST-ZIP

CAROLYN THORNTON NELSON

P

04/30/2001

04/30/20

CR2E037 (11/00)

ROBERT ALEXANDER YOUNG 1945 7TH DRIVE SW

VERO BEACH, FL 32962

ELLA EARLENE GOODMAN 2008 NORTH 50TH STREET

FORT PIERCE, FL 34947

NORMAN LEE BRUBAKER DIRECTOR 3376 1ST LANE

VERO BEACH, FL 32968

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