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

## DOCUMENT # N00317

1. Entity Name

LATIN FAITH OUTREACH, INC.



FILED Apr 14, 2003 8:00 am Secretary of State

04-14-2003 90788 009 \*\*\*\*61.25

ANABOYTA F, 34233  2. Principal Place of Business  3. Mailing Address  Sulfa, Apt. #, etc.   Sulfa, Apt. #, etc.   CHECK HERE IF MAKING CHANGES  City & Stato   Country   Zip   Country   S. Certificate of Status Desired   Papilled For Not Applicable   Not Applicable   Papilled For Not Applicable   Papilled										
Suite, Apt. 4, etc.  City & State  Application of Search S	Principal Place of Business 3859 BEE RIDGE ROAD #101 SARASOTA FL 34233 2. Principal Place of Business		3859 BEE RIDGE ROAD #101 SARASOTA FL 34233				2016 2010 1180 1180 1801 81801	BJUM OPDIA BIUGA	IK <b>e</b> n enga ngga	
City & State    City & State   City & State   City & State   City & State   A. FEI Number 59-2439 166   Rox Applicator of Nova Application   Rox Application   Rox Application   Rox Application   Rox Application   Rox Registered Agent   Rox Application   Rox Registered Agent   Rox Application   Rox Registered Agent   Rox Application										
Section   Sect	Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
So, Name and Address of Current Registered Agent  CHERP, RONALD M. 3899 BEER RIDGE RD. #101 SARASOTA FL 34233  City FL Zip Code  8. The shows named entity submits this statement for the purpose of changing its registered dispert.  Cherry FL Zip Code  8. The shows named entity submits this statement for the purpose of changing its registered dispert, or both, in the State of Forida. I am familiar with, and accept respitational dispert.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SUBMIT ALL SAPENS SUBLIFIED AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  DO NAPLO LAMOUNA DEL SOL  SIRET ACKESS  ON APPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DO NAPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DO NAPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DEBER ACKESS  ON APPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DEBER ACKESS  ON APPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DEBER ACKESS  ON APPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DEBER ACKESS  ON APPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DEBER ACKESS  ON APPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DEBER ACKESS  ON APPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DEBER ACKESS  ON APPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DEBER ACKESS  ON APPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DEBER ACKESS  ON APPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DEBER ACKESS  ON APPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DEBER ACKESS  ON APPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DEBER ACKESS  ON APPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DEBER ACKESS  ON APPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DEBER ACKESS  ON APPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DEBER ACKESS  ON APPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DEBER ACKESS  ON APPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DEBER ACKESS  ON APPLO LAMOUNA DEL SOL  LIMA, PERN SUBLIT AMERICA  DEBER ACKESS  ON APPLO LAMOUNA  ON ARCKESS  ON APPLO LAMOUNA  ON ARCKESS  ON APPLO LAMOUNA  ON ARCKESS  ON APPLO LA	City & State		City & State		4.	4. FEI Number 59-2439166				
S. Name and Address of Current Registered Agent  CHERP, RONALD M. 3899 BEE RIDGE RD. #101 SARASOTA FL 34233  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 Forida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signams, hydrol or prioral name of registered agent.  FILE NOW: FEE IS \$61.25  9. Evection Campaign Financing	Zip	Country	Zip	Country	5.	Certificate of Statu	us Desired	\$8.75 A	dditional	Ţ.
CHERP, RONALD M. 3859 BEE RIDGE RD. #101 SARASOTA FL 34233  City FL Zip Code  6. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  FILE NOW: FEE IS \$61.25  9. Election Campaign Financing Street Address (P.O. Box Number is Not Acceptable)  ANDREWS, JM H.  OFFICERS AND DIRECTORS  1711		6. Name and Address of Current	Registered Agent	<u> </u>	7.	Name and Addres	ss of New Register			1
SARASOTA FL 34233  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Lam familiar with, and accept the obligations of registered agent.  SIGNATURE  SIGNATURE  FILE NOW: FEE IS \$61.25  9. Election Compasign Financing Trust Fund Contribution. Added to Fosional Added to Fosional Department of State of Florida Department o					- x-2 2-t-	ye en <del>ye yenda</del> n de	en e		<del></del>	1
B. 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 control of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the change of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the change of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the change of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the change of the purpose of change of c			,	Street	Address (F.O. E		Acceptable)			-
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 meabligations of registered agent.    Post				City			F	Zip Co	ode	-
Trust Fund Contribution.   Added to Fees   Florida Department of State    10. OFFICERS AND DIRECTORS   11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10    ITIE   NAME   D   Change   Addition    ANDREWS, JIM H. 200 NAPLO LAMOLINA DEL SOL   STREET ADDRESS    CITY-ST-ZIP   LIMA, PERU SOUTH AMERICA   CITY-ST-ZIP    ITIE   NAME   Change   Addition    ANDREWS, ALICE FAYE   Delete   TITLE    NAME   ANDREWS, ALICE FAYE    NAME   ANDREWS, ALICE FAYE    NAME   ANDREWS, ALICE FAYE    NAME   Change   Addition    ANDREWS, MARTIN R.   Delete   TITLE    NAME   ANDREWS, MARTIN R.    STREET ADDRESS   CITY-ST-ZIP    TITLE   Delete   TITLE    NAME   STREET ADDRESS    CITY-ST-ZIP   STREET ADDRESS    CITY-ST-ZIP   Change   Addition    NAME   STREET ADDRESS    CITY-ST-ZIP   Change   Addition    Change   Change   Addition    Change   Change   Addition    Change   Change   Change   Change    Change   Change   Change   Change    Change   Change   Change   Change    Change	the obliga	itions of registered agent.			4-4.	-			h, and accept	
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ANDREWS, MARTIN R.  STREET ADDRESS CITY-ST-ZIP BIRMINGHAM AL 35235  Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME NAME NAME NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ANDREWS, ALICE FAYE 200 NAPLO LAMOLINA DEL SOL	☐ Delete	NAME STREET ADDRESS				☐ Change	☐ Addition	CRZ
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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: 4

4/9/03

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