

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01000001656

1. Entity Name

ACTS WORLDWIDE EVANGELISTIC MINISTRIES, INC.

Principal Place of Business

7004 NW 16TH STT
PLANTATION FL 33313

Mailing Address

7004 NW 16TH STT
PLANTATION FL 33313

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

GERRELL, DENVIL T SR
7004 NW 16TH STT
PLANTATION FL 33313

7. Name and Address of New Registered Agent

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

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO GERRELL, HERBERT 7004 NW 16TH STT PLANTATION FL 33313	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCONIERS, RAY 7004 NW 16TH STT PLANTATION FL 33313	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GERRELL, RAMONA 7004 NW 16TH STT PLANTATION FL 33313	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GERRELL, BARBARA 7004 NW 16TH STT PLANTATION FL 33313	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCONIERS, LILLIE 7004 NW 16TH STT PLANTATION FL 33313	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT GERRELL, HERBERT 7004 NW 16TH STT PLANTATION, FL 33313	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCONIERS, RAY 7000 NW 16TH ST. ART 317 PLANTATION, FL, 33313	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER GERRELL, BARBARA 549 NEW BRUNSWICK RD SOMERSET, NJ. 08873	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCONIERS, LILLIE 7000 NW 16TH ST. ART 317 PLANTATION FL, 33313	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO GERRELL, DENVIL T 7004 NW 16TH ST PLANTATION, FL 33313	<input type="checkbox"/> Change <input checked="" 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)(f), 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: DENVIL T. GERRELL, SR. 3/27/02 954-503-3012

FILED
Apr 09, 2002 8:00 am
Secretary of State

04-09-2002 90057 019 ****61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number 94-3389754
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

0029760

CR2E037 (9/01)