

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000004350

FILED
Aug 13, 2002
Secretary of State

Entity Name: FREE INDEED MINISTRIES, INC.

Current Principal Place of Business:

742 EAGLE WAY
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

742 EAGLE WAY
NORTH PALM BEACH, FL 33408

New Mailing Address:

FEI Number: 65-1115915

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASSANO, EUGENE C
742 EAGLE WAY
NORTH PALM BEACH, FL 33408

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CASSANO, EUGENE C
Address: 742 EAGLE WAY
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: VD () Delete
Name: CASSANO, YVONNE
Address: 742 EAGLE WAY
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: STD () Delete
Name: KEARNEY, JAMES
Address: 742 EAGLE WAY
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D () Delete
Name: BORON, THOMAS
Address: 742 EAGLE WAY
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D () Delete
Name: GIANOTTI, JAMES
Address: 742 EAGLE WAY
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D (X) Delete
Name: CROSBY, CHRISTOPHER
Address: 742 EAGLE WAY
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: KOEPNICK, JAMES
Address: 742 EAGLE WAY
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KOEPNICK, JAMES

D

08/13/2002

Electronic Signature of Signing Officer or Director

Date