

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

FILED
Jun 30, 2003 8:00 am
Secretary of State

06-30-2003 90066 004 *****70.00

DOCUMENT # NO1000005371

1. Entity Name

NEW FOUND FREEDOM OUTREACH MINISTRIES, INC.



Principal Place of Business

**8407 BOULDER PLACE
TAMPA FL 33615**

Mailing Address

**8407 BOULDER PLACE
TAMPA FL 33615**

2. Principal Place of Business

8407 BOULDER PLACE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAMPA, FLORIDA

City & State

Zip
33615

Country

HILLSBOROUGH

Zip

Country

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WATLEY, ROBIN
8407 BOULDER PLACE
TAMPA FL 33615**

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PCD** ☐ Delete
NAME **WATLEY, ROBIN**
STREET ADDRESS **8407 BOULDER PLACE**
CITY-ST-ZIP **TAMPA FL 33615**

TITLE **SD** ☐ Delete
NAME **WATLEY, CURTIS**
STREET ADDRESS **8407 BOULDER PLACE**
CITY-ST-ZIP **TAMPA FL 33615**

TITLE **TD** ☐ Delete
NAME **BOWERS, ARECIA**
STREET ADDRESS **13608 N 22ND ST, APT 2**
CITY-ST-ZIP **TAMPA FL 33613**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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:

Pastor Robin Watley

5-8-03 8138887434

CR2E037 (10/02)