

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000005387

FILED
Jan 30, 2003
Secretary of State

Entity Name: MORE EXCELLENT WAY MINISTRIES, INC

Current Principal Place of Business:

2607 RAMPART LOOP
KILLEEN, TX 76542

New Principal Place of Business:

Current Mailing Address:

2607 RAMPART LOOP
KILLEEN, TX 76542

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARTLEY, HENRY M
1960 WESTBOURNE DRIVE
OVIEDO, FL 32765

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: DIR () Delete
Name: HARTLEY, JULIAN
Address: 2607 RAMPART LOOP
City-St-Zip: KILLEEN, TX 76542 US

Title: DIR () Delete
Name: HARTLEY, NATASHA D
Address: 2607 RAMPART LOOP
City-St-Zip: KILLEEN, TX 76542 US

Title: DIR () Delete
Name: HARTLEY, VIRGINIA L
Address: 1960 WESTBOURNE DR
City-St-Zip: OVIEDO, FL 32765 US

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:

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: JULIAN M. HARTLEY

DIR

01/30/2003

Electronic Signature of Signing Officer or Director

Date