

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01000007028

1. Entity Name

BURNING HEARTS MINISTRIES INTERNATIONAL, INC.

Principal Place of Business

404 DURRELL CIR.
WINTER HAVEN FL 33884

Mailing Address

404 DURRELL CIR.
WINTER HAVEN FL 33884

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

BENNETT, BARRY W
60 2ND ST. SE
WINTER HAVEN FL 33880

4. FEI Number

59-3748699

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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 D ☐ Delete
NAME SMITH, DAVID S
STREET ADDRESS 112 LAKE FLORENCE DR. NORTH
CITY-ST-ZIP WINTER HAVEN FL 33881

TITLE D ☐ Delete
NAME BENNETT, BARRY A
STREET ADDRESS 404 DURRELL CIR.
CITY-ST-ZIP WINTER HAVEN FL 33884

TITLE D ☐ Delete
NAME BENNETT, BARRY W
STREET ADDRESS 121 GREENFIELD RD.
CITY-ST-ZIP WINTER HAVEN FL 33884

TITLE D ☐ Delete
NAME LIFER, G. Lamar
STREET ADDRESS 2142 Greenleaf Blvd., SE
CITY-ST-ZIP Winter Haven, FL 33884

TITLE D ☐ Delete
NAME G. Conley Thornhill, Jr.
STREET ADDRESS 1147 Interlochen Blvd.
CITY-ST-ZIP Winter Haven, FL 33884

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

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

TITLE D ☐ Change ☒ Addition
NAME LIFER, C. Lamar
STREET ADDRESS 2142 Greenleaf Blvd., SE
CITY-ST-ZIP Winter Haven, FL 33884

TITLE D ☐ Change ☒ Addition
NAME THORNHILL, G. Conley, Jr.
STREET ADDRESS 1147 Interlochen Blvd.
CITY-ST-ZIP Winter Haven, FL 33884

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

Signature of Barry W. Bennett
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-28-02

863/299-1263

Date

Daytime Phone #

CR2E037 (9/01)

0045270

FILED
Apr 08, 2002 8:00 am
Secretary of State

04-08-2002 90072 002 ****61.25



DO NOT WRITE IN THIS SPACE