

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

FILED
May 29, 2003 8:00 am
Secretary of State

05-29-2003 90139 046 ****61.25

DOCUMENT # N01000008381

1. Entity Name

FIELD OF SOULS MINISTRIES, INC.



Principal Place of Business

**29872 70TH ST. N.
CLEARWATER FL 33761**

Mailing Address

**29872 70TH ST. N.
CLEARWATER FL 33761**

2. Principal Place of Business

3866-13th Av. So.

3. Mailing Address

3866-13th Av. So.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
ST. PETERSBURG, FL.

City & State
ST. PETERSBURG, FL.

4. FEI Number **01-0551218**

Applied For
Not Applicable

Zip
33711

Country
PINELLAS

Zip
33711

Country
PINELLAS

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**WILLIAMS, ARNOLD B
29872 70TH ST. N.
CLEARWATER FL 33761**

7. Name and Address of New Registered Agent

Name **REV. ARNOLD B. WILLIAMS**
Street Address (P.O. Box Number is Not Acceptable)
3866-13th Av. So.

City **ST. PETERSBURG** FL Zip Code **33711**

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

Rev. Arnold B. Williams

5-20-03

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 **DP** ☐ Delete
NAME **WILLIAMS, ARNOLD**
STREET ADDRESS **29872 70TH ST. N.**
CITY-ST-ZIP **CLEARWATER FL 33761**

TITLE **DV** ☐ Delete
NAME **BOYCE, RON**
STREET ADDRESS **344 APPALOOSA RD.**
CITY-ST-ZIP **TARPON SPRINGS FL 34688**

TITLE **DT** ☐ Delete
NAME **DANIELS, GILBERT**
STREET ADDRESS **4132 BOYD LN.**
CITY-ST-ZIP **PALM HARBOR FL 34685**

TITLE **DS** ☐ Delete
NAME **TALLEY, VENNIE**
STREET ADDRESS **15556 VERONA AVE., APT. B**
CITY-ST-ZIP **CLEARWATER FL 33760**

TITLE **D** ☒ Delete
NAME **ROBINSON, EDDIE**
STREET ADDRESS **1591 21ST S. SOUTH**
CITY-ST-ZIP **ST. PETERSBURG FL 33712**

TITLE **D** ☐ Delete
NAME **HARDT, NANCY**
STREET ADDRESS **14801 SUGAR CANE WAY**
CITY-ST-ZIP **CLEARWATER FL 33760**

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
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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: *Rev. Arnold B. Williams* **5-20-03 727-321-2166**

CR2E037 (10/02)