2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000001730

FILED Feb 07, 2003 Secretary of State

Entity Name: FAITH MINISTRIES INTERNATIONAL OF CENTRAL FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 113 LITTLETON CIRCLE DELAND, FL 32724 **Current Mailing Address: New Mailing Address:** P. O. BOX 680159 ORLANDO, FL 32868 FEI Number: 37-1424585 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BLACKBURN, DENNIS L 5150 BELFORT ROAD SOUTH **BUILDING 500** JACKSONVILLE, FL 32256 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change (X) Addition CRANDALL, BEN REV. Name: Name: Address: Address: 14 MANNING DRIVE City-St-Zip: City-St-Zip: BARRINGTON, RI 02806 Title: Title: () Change (X) Addition () Delete SHACKLFORD, BRAD MR. Name: Name: Address: Address: 626 TOMLINSON TERRACE City-St-Zip: City-St-Zip: LAKE MARY, FL 32746 Title: () Delete Title: SEC. () Change (X) Addition THORSELL, MARK MR. Name: Name: Address: Address: 610 RICH DRIVE City-St-Zip: City-St-Zip: OCOEE, FL 34761 Title: () Delete Title: PRES () Change (X) Addition Name: Name: SANTO, JAMEY E REV. Address: Address: 113 LITTLETON CIRCLE City-St-Zip: City-St-Zip: DELAND, FL 32724 Title: () Delete Title: () Change (X) Addition SANTO, JEANNIE L MRS. Name: Name: 113 LITTLETON CIRCLE Address: Address: City-St-Zip: City-St-Zip: DELAND, FL 32724 Title: () Delete Title: () Change (X) Addition CLATTENBURG, ALEX H REV. Name: Name: Address: Address: 310 RAVEN ROCK LANE LONGWOOD, FL 32750 City-St-Zip: 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: JAMEY E. SANTO PRES 02/07/2003