

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

**FILED**  
**Feb 24, 2003 8:00 am**  
**Secretary of State**

2/1

02-05-2003 90158 027 \*\*\*\*61.25

**DOCUMENT # N02000002154**

1. Entity Name

**FREEDOM IN CHRIST MINISTRIES, INC.**



Principal Place of Business

11251 NORVELL RD  
SPRING HILL FL 34608

Mailing Address

11251 NORVELL RD  
SPRING HILL FL 34608

55010462



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

75-3031080

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**GOODMAN, RANDY J**  
11251 NORVELL RD  
SPRING HILL FL 34608

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

*Randy Goodman*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-6-03

**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 ☐ Delete  
NAME **P GOODMAN, RANDY J**  
STREET ADDRESS **P.O. BOX 10484**  
CITY-ST-ZIP **BROOKSVILLE FL 34603**

TITLE ☐ Delete  
NAME **VP HAMMETT, JEROME**  
STREET ADDRESS **206 OAKWOOD DRIVE**  
CITY-ST-ZIP **BROOKSVILLE FL 34601**

TITLE ☐ Delete  
NAME **S GOODMAN, JULIE A**  
STREET ADDRESS **P.O. BOX 10484**  
CITY-ST-ZIP **BROOKSVILLE FL 34603**

TITLE ☐ Delete  
NAME **T HAMMETT, MERLE**  
STREET ADDRESS **206 OAKWOOD DRIVE**  
CITY-ST-ZIP **BROOKSVILLE FL 34601**

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

TITLE ☒ Change ☐ Addition  
NAME **T Julie Goodman**  
STREET ADDRESS **11251 Norvell Rd**  
CITY-ST-ZIP **Spring Hill FL 34608**

TITLE ☒ Change ☐ Addition  
NAME **S merle hammett**  
STREET ADDRESS **206 Oakwood Drive**  
CITY-ST-ZIP **Brooksville FL 34601**

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

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:

*Randy Goodman*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

352-684-5754

Date

Daytime Phone #

CR2E037 (10/02)