2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000003035

FILED Apr 28, 2003 Secretary of State

Entity Name: THE TWELVE TRIBES OF JUDAH MINISTRIES INCORPORATION

Current Principal Place of Business:			New Prin	New Principal Place of Business:	
1431 PEG ORLANDC	LANE), FL 32808				
Current Mailing Address:			New Mai	New Mailing Address:	
1431 PEG ORLANDC	LANE), FL 32808				
FEI Number:	46-0475676	FEI Number Applied For()	FEI Number Not Ap	plicable () Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name an	d Address of New Registered Agent:	
1431 PEG	D, DEBORAH LANE), FL 32808	В			
	named entity of Florida.	submits this statement for the p	ourpose of changing	its registered office or registered agent, or both,	
SIGNATUF		sia Signatura of Dagistarad Ag	-n+	Data	
OFFICER		nic Signature of Registered Age		Date	
OFFICERS	S AND DIREC	TORS:	ADDITIO	NS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (STAFFORD, D 1431 PEG LAN ORLANDO, FL	E	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	BELLAMY, DAI	ILLS RD APT 203	Title: Name: Address: City-St-Zip:	V (X) Change () Addition BELLAMY, DARSHAY 1431 PEG LANE ORLANDO, FL 32808	
Title: Name: Address: City-St-Zip:	T (FLOWERS, JO 4931 POLARIS ORLANDO, FL	ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SMITH, LA TO	3 WILLOW TERR	Title: Name: Address: City-St-Zip:	S (X) Change () Addition SMITH, LA TONYA 5415 OLD OAK TREE DRIVE ORLANDO, FL 32808	
Title: Name: Address: City-St-Zip:	P (STAFFORD, G 4609 NE 21ST OCALA, FL 34	СТ	Title: Name: Address: City-St-Zip:	D (X) Change () Addition BRINSON, VIVALONIA 3706 WEST JEFFERSON STREET ORLANDO, FL 32805	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition HOLT, LEONARD D DR. 6501 VERNON STREET ORLANDO, FL 32808	

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: DEBORAH STAFFORD P 04/28/2003