2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) DOCUMENT # NO2000007601

FILED Jun 16, 2003 8:00 am Secretary of State

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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PENIEL F	ELLOWSHIP MINISTRIES INC.	٠		 -				
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2. Principal Place of Business ST-F E March St. Suite, Apt. 8, ofto. City & Spare Cry &							(I) 1 115M	i barren K	
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City & Spile Ci	514 F	E Main St.	y ·		1)				
20 County 25g .County 5. Certificate of Status Desired .S. 75 Accidional .S.	Suite, Apt.	#, etc.				IECK HERE IF MAKIN	IG CHANGES	· .	
S. Name and Address of Current Registered Agent 7. Name and Address and New Registered Agent 7. Name and Address and New Registered Agent 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am feathwise with, and accept the obligations of registered agent, or both in the State of Florida. I am feathwise with, and accept the obligations of registered agent, or both in the State of Florida. I am feathwise with, and accept the obligations of registered agent, or both in the State of Florida. I am feathwise with, and accept the obligations of registered agent, or both in the State of Florida. I am feathwise with, and accept the obligations of registered agent, or both in the State of Florida. I am feathwise with, and accept the obligations of registered agent, or both in the State of Florida. I am feathwise with, and accept the obligations of registered agent, or both in the State of Florida. I am feathwise with, and accept the obligations of registered agent, or both in the State of Florida. I am feathwise with, and accept the obligations of registered agent, or both in the State of Florida. I am feathwise with, and accept the obligations of registered agent, or both in the State of Florida. I am feathwise with, and accept the obligations of registered agent, or both in the State of Florida. I am feathwise with, and accept the obligations of registered agent, or both in the State of Florida. I am feathwise with, and accept the obligation of registered agent, or both in the State of Florida. I am feathwise with, and accept the obligation of registered agent, or both in the State of Florida. I am feathwise with, and accept the obligation of registered agent, or both in the State of Florida. I am feathwise with, and accept the obligation of registered agent, or both in the State of Florida. I am feathwise with, and accept the obligation of registered agent, or both in the state of Florida. I am feathwise with, and accept the obligat		ura PL	City & State		4. FEI Number 30	63881	·		
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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	CITY-ST-ZIP	The state of the s	,		,			}	
	12. I hereby c	ertify that the information supplied with th	is filing does not qualify for th	e exemption stated in Sec	tion 119.07(3)(i), Florida	a Sitatutes. I further cer	rtify that the in	formation	