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

## DOCUMENT # N02000008783

1. Entity Name

BEYOND JAIL MINISTRIES, INC.



## FILED Jan 13, 2003 8:00 am Secretary of State

01-13-2003 90685 030 \*\*\*\*61.25

Principal Place of Business 004 BROWER DRIVE RADENTON FL 34211		Mailing Address 8004 BROWER DRIVE BRADENTON FL 34211		) (BB)((B)( B)( BB)(B)((B)(B)(B)(B)(B)(B)(B)(B)(B)(B)(B)		
2. Principal Pl	lace of Business	3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number Applied For Not Applicable		
Zip	Country	Zip	Country	_5. Certificate of Status Desire	¢0.75	ditional
	6. Name and Address of Current	Registered Agent	<u> </u>	7. Name and Address of Ne	w Registered Agent	
SARASOT  8. The above	LISA G PRANGE AVENUE TA FL 34136  named entity submits this statement for ions of registered agent.	or the purpose of changing its	Street Addre	Sue Ann Ben ass (P.O. Box Number is Not Accept 8004 Brower adenton jistered agent, or both, in the State of	Orive FL Zip Code 342	-11
	Signature, typed or printed name of registered agent FILE NOW: FEE IS \$61.25	9. Election Car	TE: Registered Agent signature re mpaign Financing Contribution.	\$5.00 May Be	Make Check Payable orida Department of S	
10.	OFFICERS AND DI	RECTORS	11.	ADDITIONS/CHANGES TO OFF	TICERS AND DIRECTORS IN	10
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS	9004 Brower Or	<u> </u>	Addition S
TITLE NAME		☐ Delete	TITLE	Bradentow, Fl 34 rice-President	☐ Change	□##ddition 2
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	ileen Klang 1729 LARKRIDGE RU SARGEOTA 7-1 34	·cic	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	HILE S	secretary wasty Smith 1327 Bay Street SARASOTA, FL 3423	□ Gliange	□•Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE	reasurer Fric Jackson 305 Pope Road Boadenton FL 3421	☐ Change	Addition
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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 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:

QUENTURE BETONIRED

musen 9, 2003

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