

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 01, 2007 8:00 am**  
**Secretary of State**

05-01-2007 90029 033 \*\*\*\*70.00

DOCUMENT # **NO7559**  
1. Entity Name  
**SEED SOWERS EUANGELISTIC ASSOCIATION**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
**FLORIDA**  
Suite, Apt. #, etc.  
**1745 Olive ST**  
City & State  
**LAKELAND, FL**

3. Mailing Address  
**1745 Olive ST**  
Suite, Apt. #, etc.  
City & State  
**LAKELAND, FL**  
Zip  
**33815** Country  
**POIK**

**40095492**

DO NOT WRITE IN THIS SPACE

4. FEI Number  
**59-2686521** Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent  
Name **RICHARD BENDER**  
Street Address (P.O. Box Number is Not Acceptable)  
**919 Ave S SE**  
City **WINTER HAVEN FL** Zip Code **33880**

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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FEE IS \$61.25**  
**Initial or Amended UBR**

9. Election Campaign Financing  
Trust Fund Contribution.  **\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>RICHARD BENDER</b> <b>PRESIDENT</b> <b>919 Ave S SE WH. FL 33880</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>KRIS BENDER</b> <b>919 Ave S SE WH. FL 33880</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Sec.</b> <b>JOE HARELL</b> <b>3107 King John Pl. Seppner</b> <b>FL 33584</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TREASURER</b> <b>BOB SHOIT</b> <b>1011 Impatien LKIND 33885</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ADVISORY OFFICER</b> <b>FRED CONNELL</b> <b>6780 SOCROM WOP RD LKIND 33884</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ADVISORY OFFICER</b> <b>LOWELL GREEN</b> <b>HWY 20 W P.O. Box 220</b> <b>WANTHONE, FL 32640</b>

**DO NOT WRITE IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: **Richard Bender** **RICHARD BENDER** **4/27/07** **869-688-3200**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037B (12/01)