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2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 09, 2002 8:00 am
Secretary of State
05-21-2002 91201 005 ****61.25

DOCUMENT # N12624

1. Entity Name

GOOD TIDINGS TRUST, INC.

Principal Place of Business	Mailing Address
2500 RUSSELL RD GREEN COVE SPRINGS FL 32043-9492 US	2500 RUSSELL RD GREEN COVE SPRINGS FL 32043-9492 US

DO NOT WRITE IN THIS SPACE

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 59-2623095 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

WEER, DICK
2500 RUSSELL RD
GREEN COVE SPRINGS FL 32043

7. Name and Address of New Registered Agent

Name: Robert Clark Jr

Street Address (P.O. Box Number is Not Acceptable): 1175 Hatcher Dr

City: Middleburg **FL** Zip Code: 32068

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: Robert B Clark Jr — DATE: 4-25-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP KING, JERRY P. O. BOX 56 N/A REIDVILLE SC	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Robert Clark Jr. 1175 Hatcher Dr. Middleburg FL 32068	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RICHARDSON, JOYCE 781-B HILLTOP DR., #24 KEYSTONE HEIGHTS FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Thomas N. King 9320 NewCut Rd. Campobello SC 29322	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VAN GORDER, PAUL 2574 WOOD HILL LANE EAST POINT GA	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT OSTREM, DUANE 360 HIGHVIEW RD. SPARTANBURG SC	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VOLLNOGLE, KEIT 12 AUDURN CIRCLE GREENVILLE SC	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Keith Vollnogle 12 Auburn Cir Greenville SC	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: Robert B Clark Jr. DIRECTOR Robert Clark Jr. — 4-25-02 — 272-1111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #