

2002
NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # NIL 596
 1. Entity Name
GURLEY MINISTRIES INTERNATIONAL, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
715 S. NEW YORK AVE
 Suite, Apt. #, etc.
 City & State
LAKE LAND, FL
 Zip
33815 Country
POLK

3. Mailing Address
SAME
 Suite, Apt. #, etc.
 City & State
 Zip Country

REINSTATEMENT 00-02

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2712869
59-2712869
 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 LEE E. BUTLER
 Street Address (P.O. Box Number is Not Acceptable)
715 S. NEW YORK AVE
 City LAKE LAND FL Zip Code 33815

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 Lee E. Butler
Signature, typed or printed name of registered agent and title if applicable.

07/29/02
DATE

(NOTE: Registered Agent signature required when reinstating)

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
PRESIDENT
GEORGE R. GURLEY
414 HEATHER POINT DR.
LAKE LAND, FL 33809

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
VICE PRESIDENT
MANDY GURLEY
414 HEATHER POINT DR.
LAKE LAND, FL 33809

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
SECY-TREASURER
LEE E. BUTLER
715 S. NEW YORK AVE
LAKE LAND, FL 33815

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
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 STREET ADDRESS
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TITLE
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 STREET ADDRESS
 CITY-ST-ZIP
8000008328428-3
-10/11/02-01022-029
*****8.75 *****8.75

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
8000008328428-3
-10/11/02-01022-030
*****175.00 *****175.00

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
8000008328428-3
-10/11/02-01022-031
*****183.75 *****183.75

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: Lee E. Butler LEE E. BUTLER 07/29/02 863-686-1444
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037B (12/01)