

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 18, 2004 8:00 am
Secretary of State

02-18-2004 90013 010 ****61.25

DOCUMENT # N19001

1. Entity Name

PROVERBS 31 MINISTRIES INC.



Principal Place of Business

P.O. BOX 492841
LEESBURG FL 34749-2841

Mailing Address

P.O. BOX 492841
LEESBURG FL 34749-2841

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

100A-2 E. Oak Terrace Dr.

Leesburg, FL

34748

US A



MOORE

CR2E037 (11/03)

4. FEI Number

59-2781611

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SELLAR, CHARLES
907 WEBSTER STREET
LEESBURG FL 34748

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME MARTIN, BARBARA H ☐ Delete
STREET ADDRESS 100 A-2 OAK TERRACE DRIVE
CITY-ST-ZIP LEESBURG FL 34748

TITLE VD
NAME HUX, RHODA ☐ Delete
STREET ADDRESS 513 SAN LORENZO COURT
CITY-ST-ZIP LADY LAKE FL 32159

TITLE TD
NAME MARTIN, EDWARD C ☐ Delete
STREET ADDRESS 100-A2 OAK TERRACE DRIVE
CITY-ST-ZIP LEESBURG FL 34748

TITLE SD
NAME BERLEY, KARIN A ☐ Delete
STREET ADDRESS 8968 N.E. 90TH STREET
CITY-ST-ZIP FRUITLAND PARK FL 34731

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☒ Change ☐ Addition
NAME Hux, Rhoda
STREET ADDRESS 914 N. Shore Drive
CITY-ST-ZIP Leesburg, FL 34748

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☒ Change ☐ Addition
NAME Berley, Karin A.
STREET ADDRESS 112 N. 12th Street
CITY-ST-ZIP Leesburg, FL 34748

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Barbara H. Martin*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-12-04 (352) 728-6933

Date

Daytime Phone #