

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N21653

1. Entity Name

IN CHRIST MINISTRIES, INC.

FILED
Jan 27, 2000 8:00 am
Secretary of State

01-27-2000 90090 044 ****61.25

Principal Place of Business

1113 CENTER GROVE ST.
ORLANDO FL 32839
US

Mailing Address

686 GLADWIN AVE
FERN PARK FL 32730-2002
US

2. Principal Place of Business

1040 School St.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Clermont, FL 34712

City & State

Zip

Zip

Country

U.S.A.

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

YEAGLEY, DELLA M
686 GLADWIN AVENUE
FERN PARK FL 32730

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

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 DPC
NAME YEAGLEY, DELLA M
STREET ADDRESS 686 GLADWIN AVE
CITY-ST-ZIP FERN PARK FL 32730 ☐ Delete

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

TITLE DV
NAME JONES, ANTHONY
STREET ADDRESS 1113 CENTER GROVE ST
CITY-ST-ZIP ORLANDO FL ☐ Delete

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

TITLE VD
NAME YEAGLEY, DAVID F
STREET ADDRESS 686 GLADWIN AVE
CITY-ST-ZIP FERN PARK FL 32730 ☐ Delete

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

TITLE SD
NAME MILLS, ADRIENNE
STREET ADDRESS 760 FIESTA LANE
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714 ☒ Delete

TITLE SD
NAME Vilela, Rieuza
STREET ADDRESS 3916 Scotsboro, Ct., #1517
CITY-ST-ZIP Orlando, FL 32839 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE Marketing Director
NAME Milano, Tarcis
STREET ADDRESS 5014 Dockside Dr.
CITY-ST-ZIP Orlando, FL 32822 ☐ Change ☒ Addition

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:

Signature of Della Yeagley

Della Yeagley 1/14/00

407-831-3762

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)