

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N29919

FILED  
Apr 18, 2002 8:00 AM  
Secretary of State

**Entity Name:** SHILOH COVENANT FELLOWSHIP MINISTRIES, INC.

**Current Principal Place of Business:**

9935 BLAKEFORD MILL RD  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 17097  
JACKSONVILLE, FL 32216

**New Mailing Address:**

**FEI Number:** 36-3615077

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

YANCEY, ERIN C  
9935 BLAKEFORD MILL RD  
JACKSONVILLE, FL 32256 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LECHNER, RANDI P  
Address: 9935 BLAKEFORD MILL RD  
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete  
Name: LECHNER, CATHY L.,  
Address: 9935 BLAKEFORD MILL RD  
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete  
Name: YANCEY, ERIN C,  
Address: 9935 BLAKEFORD MILL RD  
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete  
Name: MILLER, GLENN F  
Address: 8500 SUHUARO DR.  
City-St-Zip: SCOTTSDALE, AZ 82560

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ERIN C. YANCEY

D

04/18/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date