

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N31066

FILED  
Jul 08, 2002 8:00 AM  
Secretary of State

Entity Name: STEVE LAMBERT MINISTRIES, INC.

## Current Principal Place of Business:

196 S. HAMPTON WAY  
JUPITER, FL 33458 US

## New Principal Place of Business:

3414 PRIMROSE CT  
APT # 208  
PALM BEACH GARDENS, FL 334510 US

## Current Mailing Address:

P.O. BOX 744  
JUPITER, FL 33468

## New Mailing Address:

P.O. BOX 744  
JUPITER, FL 33468 US

FEI Number: 59-2941275

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LAMBERT, STEVE  
170 E. HAMPTON WAY  
JUPITER, FL 33458 US

## Name and Address of New Registered Agent:

LAMBERT, STEVE  
3414 PRIMROSE CT  
APT #208  
PALM BEACH GARDENS, FL 33410 US

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:

07/08/2002

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: LAMBERT, STEVE  
Address: 170 E. HAMPTON WAY  
City-St-Zip: JUPITER, FL 33458

Title: VD ( ) Delete  
Name: LAMBERT, SAUNDRA  
Address: 170 E. HAMPTON WAY  
City-St-Zip: JUPITER, FL 33458

Title: D ( ) Delete  
Name: CASEY, CAMILLE  
Address: 6701 MALLARDS COVE #26C  
City-St-Zip: JUPITER, FL 33458

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: LAMBERT, STEVEN  
Address: 3414 PRIMROSE CT, APT #208  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: VD (X) Change ( ) Addition  
Name: LAMBERT, SAUNDRA  
Address: 3414 PRIMROSE CT, APT #208  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: D (X) Change ( ) Addition  
Name: CASEY, CAMILLE  
Address: 6701 MALLARDS COVE #26C  
City-St-Zip: JUPITER, FL 33458 US

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: STEVEN LAMBERT

PSTD

07/08/2002

Electronic Signature of Signing Officer or Director

Date