

# 2000 UNIFORM BUSINESS REPORT (UBR)

4/4.

**FILED**  
**May 17, 2000 8:00 am**  
**Secretary of State**

04-04-2000 90025 018 \*\*\*\*61.25

**DOCUMENT # N32135**

1. Entity Name

**KEVIN SHOREY MINISTRIES, INC.**

Principal Place of Business

4779 CONCORDIA LANE  
 BOYNTON BEACH FL 33436  
 US

Mailing Address

P.O. BOX 3329  
 BOYNTON BEACH FL 33424-3329  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-0119821**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

**SHOREY, KEVIN**  
**4779 CONCORDIA LANE**  
**BOYNTON BEACH FL 33436**

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.

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**

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 **PD** ☐ Delete  
 NAME **SHOREY, KEVIN**  
 STREET ADDRESS **4779 CONCORDIA LANE**  
 CITY-ST-ZIP **BOYNTON BCH FL**

TITLE **VO** ☐ Delete  
 NAME **EVERETT, DALE W**  
 STREET ADDRESS **1300 W MAIN ST**  
 CITY-ST-ZIP **WAUCHULA FL 33873**

TITLE **STD** ☐ Delete  
 NAME **KENDRICK, CHRISTINE**  
 STREET ADDRESS **4779 CONCORDIA LANE**  
 CITY-ST-ZIP **BOYNTON BEACH FL**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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 **VO** ☒ Change ☐ Addition  
 NAME **EVERETT, DALE W.**  
 STREET ADDRESS **230 W. PHEASANT HILL DR.**  
 CITY-ST-ZIP **DUNCAN, SC 29334**

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

TITLE ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption indicated on this report or supplemental report is true and accurate and that my signature sha of the corporation or the receiver or trustee empowered to execute this report as required by C changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**KEVIN SHOREY**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Please note,  
 the "D" has  
 been added  
 to Everett's  
 name (only  
 change was  
 the address)*

Information  
 or director  
 Block 11 if

CR2E037 (9/99)