

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N35217

1. Entity Name

OPEN AIR CAMPAIGNERS - OVERSEAS MINISTRIES, INC.

Principal Place of Business

% DAVID J. WILSON  
882 N W SUNSET DRIVE  
STUART FL 34994

Mailing Address

% DAVID J. WILSON  
882 N W SUNSET DRIVE  
STUART FL 34994

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

65-0165028

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

WILSON, DAVID J.  
882 N W SUNSET DRIVE  
STUART FL 34994

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME WILSON, DAVID J.  
STREET ADDRESS 882 N W SUNSET DR.  
CITY-ST-ZIP STUART FL ☐ Delete

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

TITLE VD  
NAME PHELPS, CHARLES  
STREET ADDRESS 1856 5TH AVENUE SOUTH  
CITY-ST-ZIP ANOKA MN ☐ Delete

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

TITLE DS  
NAME STOESZ, RON  
STREET ADDRESS 515 VERMONT AVE  
CITY-ST-ZIP ST. CLOUD FL ☐ Delete

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

TITLE D  
NAME GWINN, GORDON  
STREET ADDRESS 13365 HEATHER STREET NW  
CITY-ST-ZIP ANOKA MN ☐ Delete

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

TITLE TCD  
NAME NELSON, STEPHEN P.  
STREET ADDRESS 312 DUBLIN DR  
CITY-ST-ZIP LAKE MARY FL 32745 ☐ Delete

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

TITLE ☐ Delete  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/01 (561)692-4283

Date

Daytime Phone #

CR2E037 (10/00)

FILED  
Jan 23, 2001 8:00 am  
Secretary of State

01-23-2001 90037 018 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE