## 2001 UNIFORM BUSINESS REPORT (UBR)

## Apr 24, 2001 8:00 am § Secretary of State **DOCUMENT # N38023** 1. Entity Name 04-24-2001 90306 001 \*\*\*\*61.25 GOD IS LOVE MINISTRY, INC. 04-24-2001 90306 002 \*\*\*\*\*8.75 Principal Place of Business Mailing Address 609 S. SHORT ST. 2209 W. REYNOLDS ST. PLANT CITY FL 33566 PLANT CITY FL 33566 .384852. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0212734 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) DAVIS, ERNESTINE 609 SHORT ST PLANT CITY FL 33566 City 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 EXMESTING DOVIS Signature, typed or printed name of registered agent and title if applicable Make Check Payable to **FILE NOW:** 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition ☐ Delete TITLE TITLE NAME NAME DAVIS, JOHN, SR. STREET ADDRESS STREET ADDRESS 609 SHORT ST CITY-ST-ZIP CITY-ST-ZIP PLANT CITY FL 33566 ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME DAVIS. DARRYL STREET ADDRESS STREET ADDRESS 609 SHORT ST CITY-ST-ZiP CITY-ST-ZIP PLANT CITY FL 33566 ☐ Addition TITLE Change TITLE ☐ Delete NAME NAME DAVIS, CATHYE STREET ADDRESS STREET ADDRESS 609 SHORT ST CITY-ST-ZIP CITY-ST-ZIP PLANT CITY FL 33566 Change ☐ Addition TITI F ☐ Delete TITLE NAME NAME DAVIS, ERNESTINE STREET ADDRESS STREET ADDRESS 609 SHORT ST CITY-ST-ZIP CITY-ST-ZIP PLANT CITY-FL 33566 TITLE ☐ Addition ☐ Delete TITLE NAME NAME **GLOVER, PATRICA** STREET ADDRESS STREET ADDRESS 609 SHORT ST CITY-ST-ZIP CITY-ST-ZIP PLANT CITY FL 33566 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME DAVIS, BRENDA STREET ADDRESS STREET ADDRESS 609 SHORT ST CITY-ST-ZIP CITY-ST-ZIP PLANT CITY FL 33566

2. 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: EXPENSE OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

4/12/0/ 8/3-762-647