2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N41439

City-St-Zip:

PENSACOLA, FL

Entity Name: CARE MINISTRIES, INC.

FILED Jan 17, 2002 8:00 AM Secretary of State

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Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
4801 NOR	CEY F. LANGS RTH DAVIS HW DLA, FL 32503				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
4801 NOR	CEY F. LANGS ⁻ RTH DAVIS HW DLA, FL 32503	ON Y			
FEI Number	: 59-3046490	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
The above	DLA, FL 32501 e named entity s e of Florida.		purpose of changing its registere	d office or registered agent, or both,	
Electronic Signature of Registered Agent			ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () STAFFORD, LE 4801 N DAVIS H PENSACOLA, F	IWY.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () COLELLO, SHA 423 SHUBERT PENSACOLA, F	DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D () DUNN, JEAN,	Delete	Title: Name:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: JEAN DUNN SEC 01/17/2002