

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90154 046 ****70.00

DOCUMENT # 1041992 ✓

1. Entity Name
Dannette Fishburne Ministries, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
696 Youngstown Parkway

3. Mailing Address
35 Wesley Drive

Suite, Apt. #, etc.
Unit 313

Suite, Apt. #, etc.

City & State
Altamonte Springs FL

City & State
Belleville Illinois

4. FEI Number
59-3055299

Applied For
Not Applicable

Zip
32714

Country
Seminole

Zip
62223

Country
St. Clair

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Dannette Fishburne

Street Address (P.O. Box Number is Not Acceptable)
696 Youngstown Pkwy Unit 313

City
Altamonte Springs FL Zip Code
32714

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

**FEE IS \$61.25
Initial or Amended UBR**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
President
Dannette Fishburne
696 Youngstown Pkwy Unit 313
Altamonte Springs FL 32714

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice - President
William Scott
35 Wesley Drive
Belleville, IL 62223

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
Joyce Blander
803 Whittingham Court
Lake Mary, FL 32746

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Treasurer
Cara Johnson
2788 Cullens Court
Ocoee, FL 34761

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
Phyllis Mack
2415 Barry Drive South
Jacksonville, FL 32714

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
Yvonne Watts
215 West Pond Rd. Ext.
North Branford, Ct. 06471

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Dannette Fishburne Dannette Fishburne 4-24-02 (618)398-9931

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037B (12/01)