2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 25, 2000 8:00 am Secretary of State **DOCUMENT # N44063** 1. Entity Name FOR YOUR GLORY, INC. 01-25-2000 90051 023 ****61.25 Mailing Address Principal Place of Business POB 540401 POB 540401 MERRITT ISLAND FL 32954-0401 MERITT ISALAND FL 32954 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-3071303 أبيب المجوم Not Apail Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BARBARA M. RICHMOND Street Address (P.O. Box Number is Not Acceptable) 5812 Deer TRAIL RICHMOND, BARBARA M. 2124 OTTERBEIN AVE **COCOA FL 32926** Zip Code Titusville , FL 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 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TITLE Change ☐ Addition TITLE ☐ Delete NAME RICHMOND, BARBARA M NAME 5812 Deer Trail STREET ADDRESS STREET ADDRESS 2124-OTTERBEIN AVE Titusville, FL 32780 CITY-ST-ZIP CITY-ST-ZIP COCOA-FL 32926-TITLE ☑ Change Addition TITLE CLAYTON, ALVIN M NAME RICHMOND, MICHAEL W deceased P.O. BOX 724 STREET ADDRESS STREET ADDRESS 2124 OTTERBEIN AVE Woodland Park, CO 80866 CITY-ST-ZIP CITY-ST-ZIP **COCOA FL 32926** -Addition SD. ----TITLE VERNER, DIANE NAME STREET ADDRESS STREET ADDRESS 1409 SILVERLAKE DRIVE CITY-ST-ZIP CITY-ST-ZIP MELBOURNE FL 32941 Addition ☐ Change TITLE TITI.E ☐ Delete CLAYTON, ALVIN M NAME STREET ADDRESS STREET ADDRESS 501 EDGAR POOLE RD. CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition TITLE BARBARA ANDERSON ☐ Delete TITLE NAME 5812 Deer Trail STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Titusuille Fl. 32780 ☐ Addition TITI F ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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

Jan. 18, 2000 321-269-454