

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **N45221**

1. Entity Name

John Mark Ministries, Inc.

Principal Place of Business

Mailing Address

**2487 High Rigger Rd. 2487 High Rigger Rd.
Fernandina Beach, FL 32034 Fernandina Beach, FL
32034**

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

59-3082137

Applied For

Not Applied

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**Hicks, Terry J.
2487 High Rigger Rd.
Fernandina Beach, FL 32034**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

I, 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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	Hicks, Terry J.	
STREET ADDRESS	2487 High Rigger Rd	
CITY-STATE-ZIP	Fernandina Beach, FL 32034	
TITLE	STD	☐ Delete
NAME	Hicks, Frankie D.	
STREET ADDRESS	2487 High Rigger Rd	
CITY-STATE-ZIP	Fernandina Beach, FL 32034	
TITLE	D	☐ Delete
NAME	Rudas, C. Harry	
STREET ADDRESS	RT 2 Camp Creek Rd	
CITY-STATE-ZIP	Cornelia, GA 30531	
TITLE	D	☒ Delete
NAME	Hamel, Melvin J.	
STREET ADDRESS	861 Yulee Hills Road	
CITY-STATE-ZIP	Yulee, FL 32097	
TITLE	D	☐ Delete
NAME	Wallace, James D.	
STREET ADDRESS	770 Brenda	
CITY-STATE-ZIP	CAMDEN, AR 71701	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Add
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Add
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Add
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Add
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

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.

Terry J. Hicks

TERRY J. Hicks 5/22/02 (904) 261-7312

FILED
May 29, 2002 8:00 am
Secretary of State

05-29-2002 90688 006 ****61.25