## 2002 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

## **DOCUMENT # N46737**

1. Entity Name

Principal Place of Business

NEW START MINISTRIES OF ELLENTON, INC.

## FILED Aug 25, 2002 8:00 am Secretary of State 08-25-2002 90197 035 \*\*\*\*61.25

13 MEADOW ELLENTON FL US	MEADOW CIR 13 MEADOW CIRCLE ENTON FL 34222 ELLENTON FL 34222			COCFCION					
2. Principal Place of Bysiness  A   Wood Owlave   3. Mailing Address   A   Wood Owlave   Sylite, Apt. #, etc.   Suite, Apt. #, etc.		72	DO NOT WRITE IN THIS SPACE						
Gity & Sta	non H	Ellen Ton	F1.		4. FEI Number 6	5-0308929		Applied For lot Applicable	7
343	Sountry  Mana Tel  6. Name and Address of Current Re	3 4 127 a	Country Marie	TER	5. Certificate of St	tatus Desired	\$8.75 Ad Fee Require		
75		Blace on USour	Name		/. Italiie and Add	iress of New negistere	d Agent	<del></del>	+
GRAGG, LAWRENCE B. 13 MEADOW CIR		Street A	Street Address (P.O. Box Number is Not Acceptable)						
	N FL 34222		City	City FL Zip Code					
8. The above	e named entity submits this statement for thations of registered agent.	ne purpose of changing its reg	gistered office or	r registere	ed agent, or both, in	the State of Florida. I ar	n familiar with	, and accept	1
SIGNATURE.	Signature, typed or printed name of registered agent and	Hay Pu	O . egistered Agent signate	ture required v	when reinstating)	8/gs DATE	for-		
After September 13, 2002, min. will be \$236.25, 9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees Make Check Payable to Department of State					
10.	OFFICERS AND DIRECT		11.			ES TO OFFICERS AND D		J 10	]_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT GRAGG, LAWRENCE B. 13 MEADOW CIR ELLENTON FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	いなり	nood a	aprense Sel 9422	Change	☐ Addition	CR2E037 (4/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT STACKAY, BRUCE DR 13 MEADOW CIRCLE ELLENTON FL 34222	☐ Delete			Posd Owl		<b>∠</b> Change	Addition	SR
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TT GRAGG, BETTY 13 MEADOW CIR ELLENTON FL		NAME STREET ADDRESS CITY-ST-ZIP	Wils	was & Qui	lyn K 1 e ve a 34122	- Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition	
12. I hereby ce indicated cof the corp changed, c	ertify that the information supplied with this on this report or supplemental report is true coration or the receiver or trustee empower or on an attachment with an address, with	s fling does not qualify for the e e and accurate and that my signed to execute this report as reall other like empowered.	exemption state gnature shall har equired by Chap	ed in Section the same of the following the same of th		rida Statutes. I further ce made under oath; that I I that my name appears			