

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2002 8:00 am
Secretary of State

07-18-2002 90125 006 ****61.25

DOCUMENT # N49109

1. Entity Name

KING OF GLORY MINISTRIES - JESUS IS THE ANSWER, INC.

Principal Place of Business

Mailing Address

2380 WASHINGTON ST
 BARTOW FL 33830
 US

2380 WASHINGTON ST
 BARTOW FL 33830

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

59-3457872

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARON, JOSEPH ESO
1030 OLIVE ST
LAKELAND FL 33802

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Robert L. Glover

Robert L. Glover

7-14-02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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 DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
 NAME GLOVER, ROBERT L
 STREET ADDRESS 2380 WASHINGTON ST
 CITY-ST-ZIP BARTOW FL

TITLE D ☐ Delete
 NAME HAYDEN, JANETTE
 STREET ADDRESS 4019 GOLF VILLAGE LOOP #5
 CITY-ST-ZIP LAKELAND FL

TITLE D ☐ Delete
 NAME GLOVER, ESTELLA
 STREET ADDRESS 2380 WASHINGTON ST
 CITY-ST-ZIP BARTOW FL

TITLE D ☐ Delete
 NAME JACOBS, COY L
 STREET ADDRESS 410 W PALM DR
 CITY-ST-ZIP LAKELAND FL

TITLE D ☒ Delete
 NAME MASON, MABEL
 STREET ADDRESS 1234 REYNOLDS RD
 CITY-ST-ZIP LAKELAND FL

TITLE D ☒ Delete
 NAME MEYERHOFF, FRIEDA
 STREET ADDRESS 1001 CARPENTERS WAY
 CITY-ST-ZIP LAKELAND FL

TITLE ☐ Change ☒ Addition
 NAME REV EFRAIM BENITEL SA
 STREET ADDRESS 5646 SAWYER RD
 CITY-ST-ZIP LAKELAND FL 33810

TITLE ☐ Change ☒ Addition
 NAME DANIEL & LARA PERKINS
 STREET ADDRESS 11705 OLD Dade City RD.
 CITY-ST-ZIP Kathleen, FL 33849

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT L. GLOVER

7-14-02

863-533-0184

CR2E037 (4/02)