

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2001 8:00 am
Secretary of State

01-23-2001 90085 047 ****61.25

DOCUMENT # N50416

1. Entity Name

ARK MINISTRY, INC.

Principal Place of Business

**2711 S.W. 179 AVENUE
 MIRAMAR FL 33029
 US**

Mailing Address

**PO BOX 277991
 HOLLYWOOD FL 33027-7991
 US**

2. Principal Place of Business

3. Mailing Address

PO BOX 277991

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**CITY & STATE
 MIRAMAR, FLORIDA**

4. FEI Number

65-0367930

Applied For

Not Applicable

Zip

Country

Zip

Country

33027-7991

USA

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

**KINCAID, RON
 2711 S.W. 179 AVENUE
 MIRAMAR FL 33029**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**PD
 KINCAID, RON
 2711 S.W. 179 AVENUE
 MIRAMAR FL** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
MIRAMAR, FL 33029 ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VD
 SEYMOUR, TED
 3291 NE 4 AVE
 BOCA RATON FL** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
BOCA RATON, FL 33431 ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**CD
 FRICK, PAUL
 7720 SW 99TH AVENUE
 MIAMI FL** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
MIAMI, FL 33173 ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**TD
 DIEZ, SANTIAGO
 1401 BRICKELL AVENUE #500
 MIAMI FL** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**TD
 DIEZ, SANTIAGO
 BRICKELL BAYVIEW CENTRE
 80 SW 8 Street, Suite 1830
 MIAMI, FL 33130** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**D
 CROSS, R K
 2039 TYLER ST
 HOLLYWOOD FL 33020** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**D
 CROSS, R K
 801 S. Federal Highway
 Hollywood, FL 33020** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

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

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: **RON KINCAID**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12 Jan 2001 954-442-3436

Date

Daytime Phone #

CR2E037 (10/00)