2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 22, 2000 8:00 am
Secretary of State
01-22-2000 90070 022 ****70.00

DOCUMENT # N93000000037

1. Entity Name
Elohim Judah Ministries, Inc
~~ELOHIM CRUSADE MINISTRIES INC~~

Principal Place of Business	Mailing Address
1020 EAST MAIN STERET LEESBURG FL 34748 US	P.O. BOX 3388 BELLEVIEW FL 34421-3388 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1111 Pamela St Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Leesburg, FL	City & State
Zip: 34748 Country: Lake	Zip / Country

4. FEI Number 65-0381386 ☐ 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
WILLIAMS, LINDA D DR 8098 JUNIPER ROAD OCALA FL 34480	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	D BROWN, MAXINE 8098 JUPITER RD OCALA FL 34480	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/T/S/M/C.E.O. Maxine Brown 8098 Juniper Road Ocala, FL 34480	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T LITTLE, MAELEAN 908 LILLIE ST LEESBURG FL 34748	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Maelean Little 908 Little Street Leesburg, FL 34748	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ELDER, RALING 809 LILLIE ST LEESBURG FL 34748	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T/C James, Little 908 Lillie Street Leesburg FL 34748	☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T WILLIAMS, COREY J 8098 JUNIPER RD OCALA FL 34480	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Corey J. Williams 14345 SE 41st Terr. Summerfield, FL 34491	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D DR. Linda D. Williams 8098 Juniper Road Ocala, FL 34480	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☑ Addition

CR2E037 (9/99)

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: Maxine Y. Brown Maxine Y. Brown January 12, 2000 (352) 323-4540
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #