

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 03, 2002 8:00 am
Secretary of State

09-03-2002 90171 016 ***236.25

DOCUMENT # N93000001612

1. Entity Name

MINISTRIES OF GREAT BEGINNINGS, INC.

Principal Place of Business

5625 CENTRAL AVENUE
 ST. PETERSBURG FL 33710
 US

Mailing Address

5625 CENTRAL AVENUE
 ST. PETERSBURG FL 33710
 US

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

59-3191597

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

CHECHELE, T.S.
5625 CENTRAL AVENUE
ST. PETERSBURG FL 33710

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

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	<input type="checkbox"/> Delete
NAME	CANTRELL, LARRY	
STREET ADDRESS	5071 BLOSSOM LAKE DRIVE	325 Country Oaks
CITY-ST-ZIP	SEMINOLE FL 33772	Murphy, N.C. 28866
TITLE	VD	<input type="checkbox"/> Delete
NAME	FOLTZ, DICK	
STREET ADDRESS	5422 PARKSIDE VILLAGE, W	
CITY-ST-ZIP	ST. PETERSBURG FL 33709	
TITLE	STD	<input type="checkbox"/> Delete
NAME	CANTRELL, SUSIE	
STREET ADDRESS	5971 BLOSSOM LAKE DRIVE	325 Country Oaks
CITY-ST-ZIP	SEMINOLE FL 33772	Murphy, N.C. 28866
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	DUNN, KAY	
STREET ADDRESS	5755 6TH AVENUE NORTH STE. C-43	
CITY-ST-ZIP	ST. PETERSBURG FL 33710	
TITLE	Jeff Tomlin	<input type="checkbox"/> Delete
NAME	5971 Blossom Lake Drive	
STREET ADDRESS	Seminole, FL 33772	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

[Signature]

[Signature] Aug 1, 2002 (828) 269-3546

CR2E037 (4/02)