## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Feb 20, 2002 8:00 am DOCUMENT # N93000005776 Secretary of State SERVANT AIR MINISTRIES, INC. 02-20-2002 90174 039 \*\*\*\*61.25 rincipal Place of Business. Mailing Address 00 N ATLANTIC AVE 3000 N ATLANTIC AVE JITE 102 **SUITE 102** DCOA BEACH FL 32931 COCOA BEACH FL 32931 Principal Place of Business 3. Mailing Address Suite Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For NOT APPLICABLE Not Applicable Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name lehton. Robert e Street Address (P.O. Box Number is Not Acceptable) 3000 N ATLANTIC AVE SUITE 102 COCOA BEACH FL 32931 Zip Code FL 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. GNATURE ame of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be FILE NOW: FEE IS \$61.25 $\Box$ Trust Fund Contribution. Added to Fees **Department of State** OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 (9/01)İLΕ TITLE Delete ☐ Addition ROBERT E. LEHTON, (ME NAME 1240 S. ORLANDO AVE. REET ADDRESS STREET ADDRESS COCOA BEACH FL TY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition ☐ Change MITTON, PAUL ME. NAME 6035 VILLAGE CIRCLE S. REET ADDRESS STREET ADDRESS ORLANDO FL 32822 TY-ST-ZIP CITY-ST-ZIP SD ☐ Delete LE TITLE Addition Change KYLE-DIXON, NAME 3580 SABLE PALM LANE REET ADDRESS STREET ADDRESS TITUSVILLE FL 32780 Y-ST-ZIP CITY-ST-ZIP TD Έ ☐ Delete TITLE ☐ Change ☐ Addition SMITH. NICHOLAS NAME 3000 N ATLANTIC AVE #201 REET ADDRESS STREET ADDRESS COCOA BEACH FL 32931 Y-ST-ZIP CITY-ST-ZIP ίE Delete TITLE Change Addition WILLIAMS, KENNETH MF NAME 58 WESTVIEW LN REET ADDRESS STREET ADDRESS Y-ST-ZIP COCOA BEACH FL 32931 CITY-ST-7IP ÎF □ Delete TITLE Change ■ Addition COY, ROY ME NAME 335 DUET AVE REET ADDRESS STREET ADDRESS Y-ST-ZIP **MERRITT ISLAND FL 32952** CITY-ST-ZIP

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 tractee 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 with all other like empowered.

FILED