

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000001777

1. Entity Name

SPIRIT LED MINISTRIES, INC.

Principal Place of Business

Mailing Address

RT. 1, BOX 172
BLOUNTSTOWN FL 32424

RT. 1, BOX 172
BLOUNTSTOWN FL 32424

2. Principal Place of Business

3. Mailing Address

14329 SW Ben Clark Rd

14329 SW Ben Clark Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Blountstown, FL

City & State
Blountstown, FL

Zip 32424

Country

Zip 32424

Country

4. FEI Number 59-3386293

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

PITTS, ALLEN
RT. 1, BOX 172
BLOUNTSTOWN FL 32424

Name

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

14329 SW Ben Clark Rd

City Blountstown

FL

Zip Code 32424

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 PD
NAME PITTS, ALLEN
STREET ADDRESS RT. 1, BOX 172
CITY-ST-ZIP BLOUNTSTOWN FL 32424

☐ Delete

TITLE
NAME
STREET ADDRESS 14329 SW Ben Clark Rd
CITY-ST-ZIP Blountstown FL 32424

☐ Change ☐ Addition

TITLE VD
NAME MCCORMICK, VESTER L
STREET ADDRESS 1617 2ND ST.
CITY-ST-ZIP SOUTHPORT FL 32409

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE SD
NAME MCCORMICK, ELIZABETH
STREET ADDRESS 1617 2ND ST.
CITY-ST-ZIP SOUTHPORT FL 32409

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE TD
NAME PITTS, BETTY
STREET ADDRESS RT. 1, BOX 172
CITY-ST-ZIP BLOUNTSTOWN FL 32424

☐ Delete

TITLE
NAME
STREET ADDRESS 14329 SW Ben Clark Rd
CITY-ST-ZIP Blountstown, FL 32424

☐ Change ☐ Addition

TITLE D
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE Director
NAME James R. Hires
STREET ADDRESS 19119 Elijah Morris Rd
CITY-ST-ZIP Blountstown, FL 32424

☐ 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:

Betty Pitts REBECCA L. Lts

5-13-01 850/674-1463

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90366 024 ****61.25

769211



DO NOT WRITE IN THIS SPACE

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CR2E037 (10/00)