2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 30, 2001 8:00 am 8 Secretary of State DOCUMENT # N9500003632 THE GRAND ISLAND FREE METHODIST LIGHT AND LIFE C 01-30-2001 90162 033 ****70.00 Principal Place of Business Mailing Address 35720 GOOSE CREEK RD 35720 GOOSE CREEK RD LEESBURG FL 34788 LEESBURG FL 34788 908568 2. 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 59-6571994 Not Applicable Zip Country - -----Ζip 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 Street Address (P.O. Box Number is Not Acceptable) STUART, DEAN **8 ABERDEEN CIRCLE** LEESBURG FL 34788 Zip Code FL 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) FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. HERBERT MORTON TITLE ☐ Change ☐ Delete T Addition TRUSTEE NAME KRAMER, KEN NAME 1302 DAK # CT STREET ADDRESS 9705 HICKORY HOLLOW RD #90 STREET ADDRESS CITY-ST-ZIP LEESBURG FL 34788 CITY-ST-ZIP EESBURG, FL TITLE Delete TITLE Change ☐ Addition NAME LEE. JOAN NAME 9705 HICKORY HOLLOW RD 18 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LEESBURG FL 34788 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition REED, HOWARD NAME NAME STREET ADDRESS 666 MISTI DRIVE STREET ADDRESS CITY-ST-ZIP LEESBURG FL 34788 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition ELDRIDGE, TIM NAME NAME STREET ADDRESS **2714 BUTTERNUT COURT** STREET ADDRESS CITY-ST-ZIP EUSTIS FL 32726 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition JACKSON, BILL NAME NAME STREET ADDRESS 11841 S. SHELLEY DRIVE STREET ADDRESS CITY-ST-ZIP LEESBURG FL 34788 CITY-ST-ZIP ☐ Delete TITL F ☐ Change ☐ Addition STUART, DEAN NAME NAME 8 ABERDEEN CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LEESBURG FL 34788 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:

EDDEAN W. STVART

352-742-9148