

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000004637

1. Entity Name

LAMP LIGHT LIVING MINISTRIES, INC.

FILED
Mar 31, 2000 8:00 am
Secretary of State

03-31-2000 90079 026 ****61.25

Principal Place of Business

Mailing Address

104 W. FIRENZE AVE.
VENICE FL 34285

104 W. FIRENZE AVE.
VENICE FL 34285-3414

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0701414

Applied For

Not Applicable

Zip

Country

Zip

Country

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

LOSNER, STEVEN D
65 N.W. 16TH STREET
HOMESTEAD FL 33030

Name Gillette, Linda

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

1549 Ringling Blvd., Ste. 602

City Sarasota

FL

Zip Code

34236

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

Linda Gillette, Linda Gillette

3.28.00

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 ☐ Delete
NAME DV
STREET ADDRESS PETERS, RUSSEL M
CITY-ST-ZIP 104 W. FIRENZE AVE.
VENICE FL 34285

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME DP
STREET ADDRESS PETERS, MARGARET L
CITY-ST-ZIP 104 W. FIRENZE AVE.
VENICE FL 34285

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME DST
STREET ADDRESS WILLIAM, DALE
CITY-ST-ZIP 16981 S.W. 278TH STREET
HOMESTEAD FL 33030

TITLE ☒ Change ☐ Addition
NAME D.S.
STREET ADDRESS Williams, Dale C.
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME DT
STREET ADDRESS Hunt, Robert K.
CITY-ST-ZIP 823 Green Circle
Venice, FL 34285

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

Margaret L. Peters
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/00
Date

(941) 485-5841
Daytime Phone #

CR2E037 (9/99)