## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 29, 2000 08:00 AM DOCUMENT # N9600004700 1. Entity Name **Secretary of State** TAYLOR MINISTRIES, INC. Principal Place of Business Mailing Address 4359 DEVEREUX CIRCLE 4359 DEVEREUX CIRCLE FL PENSACOLA FL PENSACOLA 32504 32504 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 59-3397937 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CAMPBELL JAMES 3 WEST GARDEN STREET, SUITE 700 Street Address (P.O. Box Number is Not Acceptable) PENSACOLA FL32501 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. 04/29/2000 **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 Make Check Payable to . . \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE D ☐ Addition NAME BUSSEY BUSSEY ALHA NAME ALOHA STREET ADDRESS 707 COUNTY ROAD STPEET ADDRESS 707 COUNTY ROAD CITY-ST-ZIP HANCEVILLE CITY-ST-ZIP HANCEVILLE AL35077 TITLE ☐ Delete D | Change ☐ Addition NAME WOLFE NAME WOLFE SAM SAM STREET ADDRESS 1119 RETLAW ST. STREET ADDRESS 1119 RETLAW ST. CITY-ST-ZIP HUNTSVILLE CITY-ST-ZIP HUNTSVILLE 35816 ALALTITLE ☐ Delete TITLE VPSD VPSD X Change Addition NAME LANE LANE NAME HOFFMAN HOFFMAN STREET ADDRESS 5054 STRATFORD ROAD STREET ADDRESS 5054 STRATFORD ROAD CITY-ST-ZIP BIRMINGHAM ALCITY-ST-ZIP BIRMINGHAM AL35242 TITLE ☐ Delete TITLE XI Change ☐ Addition NAME MOORE LINDA MOORE LINDA STREET ADDRESS 4359 DEVEREUX CIRCLE STREET ADDRESS 4359 DEVEREUX CIRCLE CITY-ST-ZIF PENSACOLA 32504 CITY-ST-ZIP PENSACOLA 32504 TITLE ☐ Delete VD TITLE X Change ☐ Addition NAME HOFFMAN CHERVL T CHERYL T NAR/F HOFFMAN STREET ADDRESS 5054 STRATFORD ROAD STREET ADDRESS 5054 STRATFORD ROAD CITY-ST-ZIP BIRMINGHAM BIRMINGHAM ALCITY-ST-ZIP AL35242 TITLE PTD ☐ Delete TITLE Change | ☐ Addition NAME MOORE RAYMOND STREET ADDRESS 4359 DEVEREUX CIRCLE STREET ADDRESS

CITY-ST-ZIP

32504

CITY-ST-ZIP

PENSACOLA

<sup>12.</sup> 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.

RANDY MCCLENDON, DIRECTOR 501 JEFFERS RD.

GLENCOE, AL 35905