## 2000 UNIFORM BUSINESS REPORT, (UBR)

DOCUMENT # N97000000956 Sep 01, 2000 8:00 am Secretary of State 1. Entity Name WANDA TOMMIE MINISTRIES, INC. 05-11-2000 90005 033 \*\*\*\*70.00 Mailing Address Principal Place of Business 2276 N US 1 2276 N US 1 FT PIERCE FL 34946-8914 FT PIERCE FL 34948 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65 -0717991 APPLIED FOR Not Applicable \$8.75 Additional Country Country Ζiρ 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) TOMMIE, WANDA 2276 N US 1 FT PIERCE FL 34946 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Department of State FEE IS \$61.25 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ■ Addition Delete TITLE TOMMIE, WANDA G NAME STREET ADORESS STREET ADDRESS 3305 MEADOW UN CITY-ST-ZIP CITY-ST-ZIP FT PIERCE FL 34950 Change ☐ Addition ☐ Delete TITLE DŜ TITLE GASKIN, MARJONA B NAME NAME STREET ADDRESS STREET ADDRESS 2010 AVENUE O CITY-ST-ZIP CITY-ST-ZIP FT PIERCE FL 34950 Addition DT TITLE Change D. Delete TITLE MORRIS, JOHNNA S NAME NAME STREET ADDRESS STREET ADDRESS 2007 AVENUE O CITY-ST-ZIP CITY = \$1 - ZIP FT PIERCE FL 34950 Change ☐ Addition Delete TITL 5 NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Oelete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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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 it changed, or on an attachment with an address, with all other like empowered.

119700000956 /108110

DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE ATLANTA GA 39901

DATE OF THIS NOTICE: 01-21-97
NUMBER OF THIS NOTICE: CP 575 E
EMPLOYER IDENTIFICATION NUMBER: 65-071799
FORM: SS-4
0716801046 0

WANDA TOMMIE MINISTRIES INC % WANDA TOMMIE 2276 N US 1 FORT PIERCE FL 34946 FOR ASSISTANCE CALL US AT 1-800-829-1040

OR WRITE TO THE ADDRESS SHOWN AT THE TOP LEFT.

IF YOU WRITE, ATTACH THE STUB OF THIS NOTICE.

## WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER (EIN)

Thank you for your Form SS-4, Application for Employer Identification Number (EIN). We assigned you EIN 65-0717991. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in

Use your complete name and EIN shown above on all federal tax forms, payments, and related correspondence. If you use any variation in your name or EIN, it may cause a delay in processing, incorrect information in your account, or cause you to be assigned more than one EIN.

If you want to receive a ruling or a determination letter recognizing your organization as tax exempt, you should file Form 1023/1024, Application for Recognition of Exemption, with your IRS Key District office. Publication 557, Tax on how you can apply.

Thank you for your cooperation.

Keep this part for your records.

CP 575 E (Rev. 1-95

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 E

0716801046

Your Telephone Number Best Time to Call, DATE OF THIS NOTICE: 01-21-97
EMPLOYER IDENTIFICATION NUMBER: 65-0717991
FORM: SS-4

INTERNAL REVENUE SERVICE ATLANTA GA 39901

WANDA TOMMIE MINISTRIES INC % WANDA TOMMIE 2276 N US 1 FORT PIERCE FL 34946