2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9700003278

1. Entity Name

SOMEONE CARES MINISTRIES, INC.



FILED Feb 07, 2003 8:00 am Secretary of State

02-07-2003 90078 040 ****61.25

| Principal Place of Business Mailing Address 6143 MOUNTAIN LAKE DR. LAKELAND FL 33813 Mailing Address LAKELAND FL 33813 | |
|--|--|
| 2. Principal Place of Business 3. Mailing Address | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | _ |
| | ☐ CHECK HERE IF MAKING CHANGES |
| City & State City & State 4. FEI Nun | nber 59-3452492 Applied For Not Applicable |
| Zip Country Zip Country 5. Certifica | ate of Status Desired \$8.75 Additional |
| 6. Name and Address of Current Registered Agent | Fee Required nd Address of New Registered Agent |
| Name | Additional of the Hegistered Agent |
| BAGWELL, GERALD E 6143 MOUNTAIN LAKE DR. Street Address (P.O. Box Nurr | iber is Not Acceptable) |
| LAKELAND FL 33813 | |
| City | FL Zip Code |
| 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or the office of registered agent. | |
| the offigations of registered agent. | • |
| 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 \$5.00 May | 1 [|
| FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Added to Fee | Make Check Payable to Florida Department of State |
| Trust Fund Contribution. Added to Fee | Florida Department of State |
| Trust Fund Contribution. Added to Fee 10. OFFICERS AND DIRECTORS 11. ADDITIONS/C TITLE DP Delete TITLE | HANGES TO OFFICERS AND DIRECTORS IN 10 |
| Trust Fund Contribution. Added to Fee 10. OFFICERS AND DIRECTORS 11. ADDITIONS/C TITLE DP Delete NAME BAGWELL, GERALD E TITLE NAME | Florida Department of State |
| Trust Fund Contribution. Added to Fee Trust Fund Contribution. Added to Fee Title DP NAME BAGWELL, GERALD E STREET ADDRESS 6143 MOUNTAIN LAKE DR. Trust Fund Contribution. Added to Fee Title NAME STREET ADDRESS STREET ADDRESS | HANGES TO OFFICERS AND DIRECTORS IN 10 Change Addition |
| Trust Fund Contribution. Added to Fee 10. OFFICERS AND DIRECTORS 11. ADDITIONS/C TITLE NAME BAGWELL, GERALD E STREET ADDRESS CITY-ST-ZIP Added to Fee Added to Fee Added to Fee | HANGES TO OFFICERS AND DIRECTORS IN 10 Change Addition |
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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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DESCRIPTION BEGINS !!

1-28-03 (863) 648-2298