## **2001 UNIFORM BUSINESS REPORT (UBR) FILED** Mar 02, 2001 8:00 am 8 Secretary of State DOCUMENT # **N97000005070** 1. Entity Name THE JESUS WAY INC. 03-02-2001 90039 018 \*\*\*\*61.25 Principal Place of Business Mailing Address 1811 SE 48TH ST. 1811 SE 48TH ST. OCALA FL 34480 OCALA FL 34480 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 65-0782419 Not Applicable Zip Country Zip 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 L. STEWART Street Address (P.O. Box Number is Not Acceptable) STEWART, NANCY L 2832 FERN LANE 4 IDSt N.E. **DELTONA FL 32708** 34470 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. 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 DVP TITLE Delete TITLE ☐ Change ☐ Addition STEWART, ANGEL Stave Adque 63605.8444.6. Ave NAME NAME STREET ADDRESS 1811 SE 48TH ST. STREET ADDRESS CITY-ST-ZIP OCALA FL 34480 CITY-ST-ZIP Tulsa OK 74133 TITLE ☐ Delete TITLE ☐ Change ☐ Addition STEWART, TRAVIS NAME NAME STREET ADDRESS 1811 SE 48TH ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE OCALA FL 34480 TITLE ☐ Delete TITLE Change ☐ Addition NAME STEWART, YVONNE NAME STREET ADDRESS 1811 SE 48TH ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OCALA FL 34480 TITLE Delete TITI F ☐ Change ☐ Addition NAME FENN, JOHN NAME STREET ADDRESS 7700 S LEWIS AVE. STREET ADDRESS CITY-ST-ZIP **TULSA OK 74136** CITY-ST-ZIP TITLE Delete TITLE . ☐ Change Addition NAME RUGGLES, BRIAN NAME STREET ADDRESS 2135 E 139TH ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BIXBY OK 74008** TITLE Delete TITLE ☐ Change ☐ Addition NAME RUGGLES, MICHELLE NAME STREET ADDRESS 2135 E 139TH ST. STREET ADDRESS CITY-ST-ZIP **BIXBY OK 74008** 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:

riel Travis Stava# 1-31-01

352-690.2220