

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000005822

1. Entity Name

DELTA MINISTRIES, INC.

Principal Place of Business

3706 COUNTRY CLUB ROAD SOUTH
WINTER HAVEN FL 33881-9224

Mailing Address

3706 COUNTRY CLUB ROAD SOUTH
WINTER HAVEN FL 33881-9224

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GILLIS, RAYMOND
3706 COUNTRY CLUB ROAD SOUTH
WINTER HAVEN FL 33881-9224

Name

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

City

FL

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

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 PD ☐ Delete
NAME GILLIS, RAYMOND
STREET ADDRESS 3706 COUNTRY CLUB ROAD SOUTH
CITY-ST-ZIP WINTER HAVEN FL 33881

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

TITLE STD ☐ Delete
NAME GILLIS, NANCY
STREET ADDRESS 3706 COUNTRY CLUB ROAD SOUTH
CITY-ST-ZIP WINTER HAVEN FL 33881

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

TITLE D ☐ Delete
NAME CRITTENDEN, ERIC
STREET ADDRESS 227 LAKE VILLA WAY
CITY-ST-ZIP HAINES CITY FL 33844-8531

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

TITLE D ☐ Delete
NAME CRITTENDEN, KAY
STREET ADDRESS 227 LAKE VILLA WAY
CITY-ST-ZIP HAINES CITY FL 33844-8531

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

TITLE D ☒ Delete
NAME GUINN, JIM SR.
STREET ADDRESS P.O. BOX 3014
CITY-ST-ZIP HAINES CITY FL 33845

TITLE D ☐ Change ☒ Addition
NAME Michael Jarrett
STREET ADDRESS 2901 S.R. 544 E
CITY-ST-ZIP Winter Haven FL 33881

TITLE D ☒ Delete
NAME EMRICH, BOB
STREET ADDRESS 312 PENNSYLVANIA AVENUE
CITY-ST-ZIP HAINES CITY FL 33844

TITLE D ☐ Change ☒ Addition
NAME Karen Jarrett
STREET ADDRESS 2901 S.R. 544 E
CITY-ST-ZIP Winter Haven FL 33881

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:

Nancy R. Gillis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
May 04, 2000 8:00 am
Secretary of State

05-04-2000 90164 021 ****61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3474850

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

CR2E037 (9/99)