09-02-2002 90144 045 \*\*\*\*61.25

## DOCUMENT # **N97000005877**

1. Entity Name

REJOICE MINISTRIES INC. INTERNATIONAL

Principal Place of Business

Rev. Joyce Biggers 790 Powder Horn Row



Rev. Joyce Biggers 790 Powder Horn Row

Lakeland, FL 33809  Lakeland, FL 33809					2010 1800 0010 0011 0011 0011 0011 00	1782 BIJAC (B)C) (	9011 1001 1001	
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	4. FEI Number 59-3051925 Applied For			
Zip	Country	Zip	Country Da	15. Certificate of	·	\$8.75 Ac	lot Applicable	
	6. Name and Address of Current F	 Registered Agent	10		Idress of New Registered	Fee Require	ed	
	JOYCE ENSTILL HOAD 790 PO LYFL 33868 WAKE LA	wder Horn nd FL 3386	Name Street A  City	ddress (P.O. Box Number is		Zip Coo		
SIGNATURE	e named entity submits this statement for tions of registered agent.  But	the purpose of changing its - 4 G W	registered office o	r registered agent, or both, i	n the State of Florida. I am	familiar with	and accept	
	After September 13, 2002, min. will be \$236.25.	Trust Fund (	9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees Make Check Payable to Department of State			
10.	OFFICERS AND DIRE		11.	ADDITIONS/CHANG	SES TO OFFICERS AND DIF	RECTORS IN	l 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BIGGERS, JOYCE 2479 DEEN STILL ROAD POLK CITY FL 33868	☐ Delete	• TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		Joyce der Horn T I, FL 338		☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BIGGERS, JAMES R 2479 DEEN STILL ROAD POLK CITY FL 33868	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Biggers, 190 Powe	James R der Horn nd, FL 33	Propinge Row	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WILDER, SYNTHIA 553 TAVARES ROAD POLK CITY FL 33868-2779	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Synthia U 350 - 24th Winter H	vilder vsf kul H	Ghange	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		19.17	☐ Change	Addition	
TITLE NAME STREET ADDRESS STY-ST-ZIP	, .	☐ Delete	TITLE NAME STREET ADDRESS CITY-S1-ZIP		,	☐ Change	☐ Addition	
ITLE IAME TREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS		•	☐ Change	Addition	

12. I hereby certify that the information supplied with this filling 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. 1738

CITY-ST-ZIP

SIGNATURE: