

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2002 8:00 am
Secretary of State

09-12-2002 90094 047 ****70.00

DOCUMENT # N98000000077

1. Entity Name

LIFT HIGH THE CROSS MINISTRY, INC.

Principal Place of Business

Mailing Address

7601 SW 39TH ST
 DAVIE FL 33328-2716

7601 SW 39TH ST
 DAVIE FL 33328-2716

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

INGRAHAM, ROBERT
14175 ICOT BLVD.
STE. 100
CLEARWATER FL 33760

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**After September 13, 2002,
 min. will be \$236.25.**

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
 NAME STUHRENBURG, DARRELL ☐ Delete
 STREET ADDRESS 7601 SW 39TH AVENUE
 CITY-ST-ZIP DAVIE FL 33326

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

TITLE ST ☒ Delete
 NAME KOSBERG, JERRY
 STREET ADDRESS 1333 S. KIRKWOOD RD.
 CITY-ST-ZIP ST. LOUIS MO 63122

TITLE ☐ Change ☒ Addition
 NAME ST DAVID MULDER
 STREET ADDRESS 1333 S. KIRKWOOD Rd
 CITY-ST-ZIP ST. LOUIS MO 63122

TITLE M ☐ Delete
 NAME MASON, JAY
 STREET ADDRESS 7601 SW 39TH ST.
 CITY-ST-ZIP DAVIE FL 33326

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

TITLE D ☐ Delete
 NAME FREUNDT, KARL
 STREET ADDRESS 2223 SW DENDVIEW DR. Ponoview
 CITY-ST-ZIP TOPEKA KA 66614

TITLE ☒ Change ☐ Addition
 NAME FREUNDT, KARL
 STREET ADDRESS 2223 Ponoview Drive
 CITY-ST-ZIP TOPEKA, KS 66614

TITLE D ☒ Delete
 NAME LIKENS, JIM
 STREET ADDRESS 1333 S. KIRKWOOD RD.
 CITY-ST-ZIP ST. LOUIS MO 63122

TITLE DA ☐ Change ☒ Addition
 NAME Rev. JAMES MONKE
 STREET ADDRESS 2603 COTTINGTON CIR NW
 CITY-ST-ZIP NORTH CANTON, OH 44720

TITLE D ☒ Delete
 NAME BISHOP, EILEEN
 STREET ADDRESS 7601 SW 39TH STREET
 CITY-ST-ZIP DAVIE FL 33326

TITLE D ☐ Change ☒ Addition
 NAME KEN SCHROEDER
 STREET ADDRESS PMB 333-2304 W. Broadway Blvd
 CITY-ST-ZIP SEDALIA MO 65301

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:

Robert Ingram ROBERT INGRAM

Sep 11, 2002 302-521-2734

CR2E037 (4/02)