## ದ್ದಿಲ್ಲು NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

2. Principal Place of Business 3. Mailing Address   Suite. Apt. 4, etc.   CHECK HERE IF MAKING CHANGES   City & State   City & Status Desired   Status Desired Agent   Status Desired   Status Desired Agent   Status Desired   Status Desired   Status Desired   Status Desired   Status Desired   Status Desired   Status Desired Agent   Status Desired   Status Desired Agent Agent   Status Desired   Status Desired Agent Agent   Status Desired Agent   Status Desired   Status Desired Agent   Sta	UN	HIFORM BUSINE	33 REPUR	i (UDN)	_				
Principal Place of Business SUP PITST. OLEMANT FL 34711  2. Principal Place of Business Sulfo, Apt. #, etc.  3. Mailing Address Sulfo, Apt. #, etc.  City & Stato	<ol> <li>Entity Nam</li> </ol>	ne			3)	רוו רה			
Survey April 19 Survey Address of Susiness   Survey April 29   Sur	MCDUFFIE / FRESH START MINISTRIES, INC.								
2. Principal Place of Business   3. Meiling Address    Suite, Apt. #, etc.   City & State   City & State   4. FEI Number 59-3504887   Applied   Not Apt Applied   Not Applied   Not Apt Applied   Not Applied	Principal Plac	ee of Business	Mailing Address		04	APR 16 AH	11:51	E 77 N 1	
2. Principal Place of Business 3. Mailing Address   Suite, Apt. 4, etc.   City & State   A. FEI Number 59-3504887   Applied   Not Apt. 4, etc.   City & State   A. FEI Number 59-3504887   Applied   Not Apt. 4, etc.   City & State   A. FEI Number 59-3504887   Applied   Not Apt. 4, etc.   City & State   A. FEI Number 59-3504887   Applied   Not Apt. 4, etc.   City & State   A. FEI Number 59-3504887   Applied   Not Apt. 4, etc.   City & State   A. FEI Number 59-3504887   Applied   Not Apt. 4, etc.   City & Status Desired	527 PITT ST.		527 PITT ST.		SE	ORETARY OF S	TATÉ	31.01	
Suite, Apt. #, etc.   Suite, Apt. #, etc.   City & State   Country   S. Certificate of Status Desired   S8.75 Addition   Fee Required   S8.75 Addition   Fee Required   Fee Required   S8.75 Addition   Fee Required   Fee Required   S7. Name and Address of New Registered Agent   Name   Name   Name   Street Address (P.O. Box Number is Not Acceptable)   S7. Name and Address of New Registered Agent   Name   Street Address (P.O. Box Number is Not Acceptable)   S7. Name and Address of New Registered Agent   Name   Street Address (P.O. Box Number is Not Acceptable)   S7. Name and Address of New Registered Agent   Name   S7. Name and Address of New Registered Agent   Name   Na	CENTROTT	V-11/1	OCCUMENT TO STATE		"ÎA î Nei qie itiliee i	LAHASSEE, FL	. ORIĐA Hamelonica		
City & State  Country  Country  Country  Country  Country  City  S. Certificate of Status Desired  S8.75 Additions  Rea Required  Street Address of New Registered Agent  Name  MCDUFFIE, EMMA  527 PITT ST.  CLERMONT FL 34711  City  FL  Zip Code  S. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Lam familiar with, and it the obligations of registered agent.  SIGNATURE  FILE NOW: FEE IS \$61.25  9. Election Campaign Financing Frust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TILE PD  AMME MCDUFFIE, EMMA STREET ADDRESS CITY-ST-ZP CLERMONT FL 34711  CITY-ST-ZP CLERMONT FL 34711  Delete  ITILE VD  MCDUFFIE, JAMES STREET ADDRESS CITY-ST-ZP CLERMONT FL 34711  Delete  TILE STD  Delete TITLE STD  Delete TITLE STD  Delete STREET ADDRESS CITY-ST-ZP CLERMONT FL 34711  CITY-ST-ZP CLERMONT F	Principal Place of Business     3. Mailing Address				-				
Steel Address   Steel Addres	Suite, Apt.	#, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES				
Steel Address   Steel Addres	City & Stat	te	City & State		4. FEI Number 59-3504887 Applied For				
### CDUFFIE, EMMA \$27 PITT ST.  ### CLERMONT FL 34711    City   FL   Zip Code	Zip Country		Zip	Country			\$8.75 Add		
MCDUFFIE, EMMA 527 PITT ST. CLERMONT FL 34711    Street Address (P.O. Box Number is Not Acceptable)		6. Name and Address of Current F	egistered Agent	L-,				<u> </u>	
SIGNATURE  FILE NOW: FEE IS \$61.25  9. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  NAME SIREET ADDRESS CITY-ST-ZIP CLERMONT FL 34711  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  Clarge TITLE NAME STREET ADDRESS STREET A				Name					
CLERMONT FL 34711  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and a 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)    PILE NOW: FEE IS \$61.25   9. Election Campaign Financing Trust Fund Contribution.   Added to Fees   Make Check Payable to Florida Department of State	527 PITT ST.			Street Address	Street Address (P.O. Box Number is Not Acceptable)				
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 the obligations of registered agent.  SIGNATURE    Signature, typed or printed name of registered agent and title if applicable.   (NOTE, Registered Agent signature required when reliabiliting)   DATE									
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				City			FL Zip Code	9	
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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 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 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 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 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 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 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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certification in the section of the section 119.07(3)(i), Florida Statutes. I further certification in the section of the section of the section 119.07(3)(i), Florida Statutes. I further certification in the section of the section 119.07(3)(i), Florida Statutes. I further certification in the section 119.07(3)(i), Florida Statutes. I further certification in the section 119.07(3)(i), Florida Statutes. I further certification in the section 119.07(3)(i), Florida Statutes. I further certification in the section 119.07(3)(i), Florida Statutes. I further certification in the section 119.07(3)(i), Florida Statutes. I further certification in the section 119.07(3)(i), Florida Stat	12. Lhereby i	L certify that the information supplied with	this filing does not qualify for	or the exemption stated in	Section 119.07(3)(i), Flo	orida Statutes. I furthe	r certify that the in	nformation	

Foliate Daytime Phone #