

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 25, 2001 08:00 AM
Secretary of State

DOCUMENT # N98000004067

1. Entity Name
BRIDGEBUILDERS INTERNATIONAL PROPHETIC MINISTRIES, INC

Principal Place of Business
3251 HILLMONT CIR
ORLANDO FL 32817

Mailing Address
P.O. BOX 5057
WINTER PARK FL 32793

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

4. FEI Number
59-3527062

Applied For
Not Applicable

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

EVANS AARON
3251 HILLMONT CIR
ORLANDO FL 32817

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 **04/25/2001**

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

(NOTE: Registered Agent signature required when reinstalling)

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

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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MUNDY JOCKLYN 13044 HARTLE ROAD CLERMONT FL 34711 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MUNDY NATHAN 13044 HARTLE ROAD CLERMONT FL 34711 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D DRIGGERS KELLY 416 UNION STREET ST SIMONS ISLAND GA 31522 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D DRIGGERS SHAWN 416 UNION STREET ST SIMONS ISLAND GA 31522 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP EVANS AARON 3251 HILLMONT CIRCLE ORLANDO FL 32817 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: KEN KOO D 04/25/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E037 (11/00)

ANGELA EVANS, DIRECTOR
3251 HILLMONT CIRCLE

ORLANDO, FL 32817

SHARON DESALLE, DIRECTOR
2451 PALMETTO DRIVE

LONGWOOD, FL 32779

KEVIN DESALLE, DIRECTOR
2451 PALMETTO DRIVE

LONGWOOD, FL 32779

SANDY KOO, DIRECTOR
2671 KERWOOD CIRCLE

ORLANDO, FL 32817

KEN KOO, CHAIRMAN, DIRECTOR
2671 KERWOOD DRIVE

ORLANDO, FL 32817