

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000004152

1. Entity Name

THE RUBBERBAND MUSIC MINISTRY, INC.

FILED

Apr 16, 2001 8:00 am
Secretary of State

04-16-2001 90026 030 ****61.25

Principal Place of Business

8535 BAYMEADOWS RD. STE 3-215
JACKSONVILLE FL 32256

Mailing Address

8535 BAYMEADOWS RD. STE 3-215
JACKSONVILLE FL 32256

2. Principal Place of Business

7035 BAYMEADOWS RD

3. Mailing Address

7035 BAYMEADOWS RD

Suite, Apt. #, etc.

SUIT 5-215

Suite, Apt. #, etc.

SUIT 5-215

City & State

JACKSONVILLE, FL

City & State

JACKSONVILLE, FL

Zip

32216

Country

Zip

32216

Country

4. FEI Number

59-3520892

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ENCINOSA, CYNTHIA
8535 BAYMEADOWS RD, STE 3-215
JACKSONVILLE FL 32256

7. Name and Address of New Registered Agent

Name
ENCINOSA, CYNTHIA

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

7035 BAYMEADOWS RD

SUIT 5-215

City
JACKSONVILLE

FL

Zip Code

32216

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ROBINSON, ALBERT C
2418 OAKVIEW DR.
JACKSONVILLE FL 32246 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ENCINOSA, ALAN
439 SAPELO ROAD
JACKSONVILLE FL 32246 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ERCINOSA, ALAN
439 SAPELO RD
JACKSONVILLE FL 32216 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ENCINOSA, CYNTHIA
439 SAPELO RD.
JACKSONVILLE FL 32216 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MCNARY, GARY
9195 KINGS COLONY RD.
JACKSONVILLE FL 32257 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GOULD, MARLA
5007 HARROW RD.
JACKSONVILLE FL 32217 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GAIL D. ROBINSON
2418 OAKVIEW DR
JACKSONVILLE, FL 32246 ☐ Change ☒ Addition

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

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

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

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

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

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/01
Date

904-448-5448
Daytime Phone #

CR2E037 (10/00)