

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000005994

1. Entity Name

REAL WORLD MINISTRIES INC.

FILED
Apr 21, 2000 8:00 am
Secretary of State

04-21-2000 90185 008 ****61.25

641986



DO NOT WRITE IN THIS SPACE

Principal Place of Business
955 53RD ST E #920
BRADENTON FL 34208

Mailing Address
PO BOX 20611
BRADENTON FL 34204-0611

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0873664

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

RYAN, GORDON
955 53RD ST E #920
BRADENTON FL 34208

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Delete
NAME	RYAN, GORDON	
STREET ADDRESS	955 53RD ST E #920	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE	VSD	<input type="checkbox"/> Delete
NAME	RYAN, CATHY	
STREET ADDRESS	955 53RD ST E #920	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WHITE, RANDY	
STREET ADDRESS	2511 N GRADY	
CITY-ST-ZIP	TAMPA FL 33607	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WHITE, PAULA	
STREET ADDRESS	2511 N GRADY AVE	
CITY-ST-ZIP	TAMPA FL 33607	
TITLE	D	<input type="checkbox"/> Delete
NAME	RYAN, RICHARD	
STREET ADDRESS	215 RIO VILLA DR #3167	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	RUBIN, GEORGE	
STREET ADDRESS	2400 ARDEN DR	
CITY-ST-ZIP	SARASOTA FL 34232	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 of R Gordon R Ryan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-14-00

Date

941-745-9591

Daytime Phone #

CR2E037 (9/99)