2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000000073

Entity Name: GOSPEL MINISTRY OF JESUS CHRIST, INC.

FILED Feb 13, 2002 8:00 AM Secretary of State

Current Pri	ncipal Place o	of Business:	New Princi	New Principal Place of Business:		
3533 GOCK SARASOTA		US				
Current Mailing Address:			New Mailin	New Mailing Address:		
PO BOX 14 SARASOTA		US				
FEI Number: 6	65-0840453	FEI Number Applied For ()	El Number Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
RITTER, G.T. "SKIP" 3533 GOCIO RD SARASOTA, FL 34235 US			3533 GÓCI	RITTER, G.T. 3533 GOCIO RD SARASOTA, FL 34235 US		
The above r in the State		ibmits this statement for the purpo	ose of changing its	s registered of	fice or registered agent, or both,	
SIGNATURE: G.T. RITTER				02/13/2002		
	Electronic	Signature of Registered Agent			Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () E RITTER, G.T. 3533 GOCIO RD SARASOTA, FL	Delete 34235 US	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	STD () E RITTER, M. TERF 3533 GOCIO RD SARASOTA, FL		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () E MILLIGAN, ERNE 5686 25TH ST CI BRADENTON, FL	RCLE EAST	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () E MILLIGAN, CRYS 5686 25TH ST. C BRADENTON, FL	IRCLE EAST	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	()[Delete	Title: Name: Address: City-St-Zip:	D () BARNWELL, SA 3731 NORGALE SARASOTA, FL	S DR	
Title: Name: Address: City-St-Zip:	()[Delete	Title: Name: Address: City-St-Zip:	D () BARNWELL, EN 3731 NORGALE SARASOTA, FL	S DR	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: M TERRI RITTER STD 02/13/2002