

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000000073

FILED
Apr 03, 2003
Secretary of State

Entity Name: GOSPEL MINISTRY OF JESUS CHRIST, INC.

Current Principal Place of Business:

3533 GOCIO RD
SARASOTA, FL 34235 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 14081
SARASOTA, FL 34278 US

New Mailing Address:

FEI Number: 65-0840453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RITTER, G.T.
3533 GOCIO RD
SARASOTA, FL 34235 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RITTER, G.T.
Address: 3533 GOCIO RD
City-St-Zip: SARASOTA, FL 34235 US

Title: STD () Delete
Name: RITTER, M. TERRI
Address: 3533 GOCIO RD
City-St-Zip: SARASOTA, FL 34235 US

Title: D () Delete
Name: MILLIGAN, ERNEST
Address: 5686 25TH ST CIRCLE EAST
City-St-Zip: BRADENTON, FL 34203

Title: D () Delete
Name: MILLIGAN, CRYSTAL
Address: 5686 25TH ST. CIRCLE EAST
City-St-Zip: BRADENTON, FL 34203

Title: D () Delete
Name: BARNWELL, SAM
Address: 3731 NORGALES DR
City-St-Zip: SARASOTA, FL 34235

Title: D () Delete
Name: BARNWELL, EMILY
Address: 3731 NORGALES DR
City-St-Zip: SARASOTA, FL 34235

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TERRI RITTER

STD

04/03/2003

Electronic Signature of Signing Officer or Director

Date