2000 UNIFORM BUSINESS REPORT (UBR) 5/17 FILED Jun 21, 2000 8:00 am Secretary of State DOCUMENT # N9900000504 1. Entity Name PARADISE INTERFAITH NETWORK, INC. 05-12-2000 90008 040 ****61.25 Principal Place of Business Mailing Address ST. PETER'S CATHOLIC CHURCH ST. PETER'S CATHOLIC CHURCH 31300 OVERSEAS HIGHWAY P.O. BOX 430657 BIG PINE KEY FL 33043-0657 BIG PINE KEY FL 33043 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-69091 Not Applicable Zip \$8.75 Additional Zio Country Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) PLETAN, GERALD W ESQUIRE 25000 OVERSEAS HIGHWAY SUMMERLAND KEY FL 33042 Zip Code City 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) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. 66/6) ☐ Change Addition TITLE ☐ Defete TITLE MULLANE, FATHER THOMAS NAME NAME STREET ADDRESS STREET ADDRESS P.O. BOX 430657 N/A CITY-ST-ZIP CITY-ST-ZIF BIG PINE KEY FL 33043 Change . C Addition ☐ Delete TITLE NAME DERRETH, RICHARD REV STREET ADDRESS STREET ADDRESS 250 KEY DEER BLVD CITY-ST-712 CITY ST 7th BIG PINE KEY FL 33043 Change ☐ Addition ☐ Delete TILE TITLE SD LAWES, STEPHEN NAME STREET ADDRESS STREET ADDRESS 100 COUNTY ROAD CITY-ST-ZIP CITY-ST-ZIP-BIG PINE KEY FL 33043 STEPHEN LAWES ☐ Change ☐ Addition ☑ Delete TD NAME NUGENT, HAROLD NAME 100 COUNTY POAD STREET ADDRESS STREET ADDRESS 3746 PARK AVENUE CITY-ST-ZIP CITY-ST-ZIP BIG PINE KEY FL 33043 ☐ Change Addition ☐ Celete TITLE me NAME NAME altman, James Rév STREET ADDRESS MM81 C/O MATECUMBE UNITED METHODIST CHURCH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ISLAMORADA FL 33036 Delete Change Addition TITLE TITLE NAME ARTELT, TOM REV NAME STREET ADDRESS STREET ADDRESS 2713 FLAGLER AVENUE CITY-ST-IP CITY-ST-ZIP KEY WEST FL 33040 12. I hereby certify that the information supplied with this filling 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR