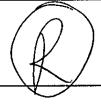
2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9900000606

1. Entity Name

MISSION POSSIBLE OUTREACH MINISTRIES, INC.



FILED Sep 13, 2000 8:00 am Secretary of State

09-13-2000 90055 004 ****70.00

Principal Place of Business
4101 NORTH APRIL STREET

Mailing Address

4101 NORTH APRIL STREET 4101 NORTH APRIL STREET LAKELAND FL 33813 LAKELAND FL 33813

	Place of Business 3. Mailing Address				,						
				4 N. April Street				MOITE MITHER	DAGE		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	эт. #, etc.				- DO NOT V	VRITE IN THIS S	PACE	-	
City & Stat	e	City & State			-	4. FEI Number	ر مر		→ Ar	oplied For	
Lakel		Lakeland,				59-3557515			No	ot Applicable	
Zip 338	Country	Zip 33813				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							
									•		
SPIEGEL & UTRERA, P.A.					Street Address (P.O. Box Number is Not Acceptable)						
343 ALMERIA AVENUE CORAL GABLES FL 33134									<u>,</u> - `		
CONAL G	ADLES C 33134		City					FL	Zip Cod	ie	
							w.				
8. The above	named entity submits this statement for	the purpose of changing it	s registere	ed office or	r registere	ed agent, or both	, in the state of	Florida.		·	
بر بر		_		•							
CICALATURE 9/8/00											
SIGNATURE Signature, typed of 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					¢5	00 4	м	ake Check P	avable to	, 1	
	Contributio	·			Department of State						
Aiter Ocpt	ember 13, 2000 min. will be \$23	0.20						- · p - · · · · · · · · · · · · · · · ·		a	
10.	OFFICERS AND DIR	ECTORS	11.		. A	DDITIONS/CHA	NGES TO OFF	ICERS AND DIR	ECTORS IN	V 10	
TITLE	PQ	☐ Delete	TITLE		PTD				Change	☐ Addition	
NAME	COOK, ALFRED L		NAM	E	Cook	N. April	<u>L.</u>			ļ	
STREET ADDRESS	4101 NORTH APRIL STREET			ET ADDRESS	4104	N. April	Street	•		[
CITY-ST-ZIP	LAKELAND FL 33813		CITY	-ST-ZIP		eland, FL	35813	?			
TITLE	VD	☐ Delete	TITLE		vsD	٨.	4		K Change	Addition	
NAME	COOK, DEBORA L		NAM		Cook	c, Debor	a L.			Jan 1	
STREET ADDRESS	4101 NORTH APRIL STREET			ET ADDRESS	4104	N. April.	2201	~	•		
CITY+ST-ZIP	LAKELAND FL 33813			-ST-ZIP		land, FL	, 5781	>		3	
TITLE	SD	Delete	TITLE		Ď.				☐ Change	Addition	
NAME -	SPATES, EMMA L 4101 NORTH APRIL STREET			ET ADDRESS	Date	e,-Lawre NW9thA	we 430	5 =	·		
STREET ADDRESS CITY-ST-ZIP	LAKELAND FL 33813			-ST-ZIP	000	lberry, Fi	33810	, D		1 9	
	T .	57 0-1-4-	-		11 12	Dary,	<i>J</i> 300		☐ Change	Addition	
TITLE NAME	GARNER, PORTER L JR	Delete	TITLE NAM						Onlange	, Co Addition	
STREET ADDRESS	4101 NORTH APRIL STREET			ET ADDRESS							
CITY-ST-ZIP	LAKELAND FL 33813			-ST-ZIP							
TITLE		☐ Delete	TITLE						☐ Change	Addition	
NAME			NAM						•	_	
STREET ADDRESS				ET ADDRESS							
CITY-ST-ZIP			CITY	-ST-ZIP							
TITLE		☐ Defete	TITLE						☐ Change	Addition	
NAME			MAM	E .							
STREET ADDRESS	~		STRE	ET ADDRESS							
CITY-ST-ZIP	1	. ,	CITY	-ST-ZIP	1						

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/8/00 813-286-1123

CR2E037 (5/00