

2000 UNIFORM BUSINESS REPORT (UBR)

6/8

FILED
Jul 19, 2000 8:00 am
Secretary of State

06-08-2000 90034 038 ****61.25

DOCUMENT # **N9900000 2735** ✓
 1. Entity Name
Frank & Betty Hannor Ministries Inc

Principal Place of Business Mailing Address
3410 NW 6th St **3410 NW 6th St**
Ft. Lauderdale FL 33311 **Ft. Lauderdale FL 33311**

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country

4. FEJ Number **65-0922076** Applied For
 Not Applicable
 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent
Betty Hannor Name
3410 NW 6th St Street Address (P.O. Box Number is Not Acceptable)
Ft. Lauderdale FL 33311 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 NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete Frank L Hannor 3410 NW 6th St Ft. Lauderdale FL 33311	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete Betty Hannor 3410 NW 6th St Ft. Lauderdale FL 33311	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **5/10/00** Daytime Phone # **954 327-1309**

CR2E037 (9/99)

DELETE-(1) OFFICER

2000 UNIFORM BUSINESS REPORT (UBR)

ANNETTE LACUE

DOCUMENT # N99000002735

1. Entity Name

FRANK & BETTY HANNOR MINISTRIES, INC.

Principal Place of Business

Mailing Address

3410 NW 6TH ST.
FT. LAUDERDALE FL 33311

3410 NW 6TH ST.
FT. LAUDERDALE FL 33311

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

Attachment
308470

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HANNOR, BETTY
3410 NW 6TH ST.
FT. LAUDERDALE FL 33311

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
After September 13, 2000 min. will be \$236.25

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
NAME HANNOR, FRANK L
STREET ADDRESS 3410 NW 6TH ST.
CITY-ST-ZIP FT. LAUDERDALE FL 33311

☐ Delete

TITLE SD
NAME LACUE, ANNETTE
STREET ADDRESS 3410 NW 6TH ST.
CITY-ST-ZIP FT. LAUDERDALE FL 33311

☒ Delete

TITLE TD
NAME HANNOR, BETTY
STREET ADDRESS 3410 NW 6TH ST.
CITY-ST-ZIP FT. LAUDERDALE FL 33311

☐ Delete

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CITY-ST-ZIP

☐ Change ☐ Addition

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SIGNATURE