

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000002789

FILED  
Mar 04, 2002 8:00 AM  
Secretary of State

Entity Name: REAL LIFE MINISTRIES, INC.

## Current Principal Place of Business:

8314 ARCHWOOD CIRCLE  
TAMPA, FL 33615

## New Principal Place of Business:

7520 W. WATERS AVE  
SUITE 11  
TAMPA, FL 33615

## Current Mailing Address:

P.O. BOX 260276  
TAMPA, FL 33634

## New Mailing Address:

FEI Number: 59-3574508

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GONZALEZ, ALAN F ESQ.  
1515 RINGLING BOULEVARD, SUITE 900  
SARASOTA, FL 34236 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: PTD ( ) Delete  
Name: BALLANTYNE, SCOT  
Address: 8314 ARCHWOOD CIRCLE  
City-St-Zip: TAMPA, FL 33615

Title: VDS ( ) Delete  
Name: BALLANTYNE, SUSAN  
Address: 8314 ARCHWOOD CIRCLE  
City-St-Zip: TAMPA, FL 33615

Title: D ( ) Delete  
Name: DEAN, JAMES  
Address: 8907 WATERWAY DR  
City-St-Zip: TAMPA, FL 33635

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## 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: D ( ) Change (X) Addition  
Name: LEWIS, ROBERT T  
Address: 8501 RED SETTER LANE  
City-St-Zip: CHARLOTTE, NC 28227

Title: D ( ) Change (X) Addition  
Name: MAYS, CHRIS  
Address: 345 MONTGOMERY CIRCLE  
City-St-Zip: STEPHENS CITY, VA 22655

Title: T ( ) Change (X) Addition  
Name: RIZZO, DEBBIE  
Address: 7930 BAY POINT DR. B36  
City-St-Zip: TAMPA, FL 33615

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: SCOT BALLANTYNE

PD

03/04/2002

Electronic Signature of Signing Officer or Director

Date