

2000 UNIFORM BUSINESS REPORT (UBR)

2/2

DOCUMENT # N99000003354

1. Entity Name

NEW FREEDOM MINISTRIES, INC.

FILED

00 MAY 24 PM 1:41

Principal Place of Business

Mailing Address

11500 S.W. KANNER HIGHWAY #314
INDIANTOWN FL 34956

11500 S.W. KANNER HIGHWAY #314
INDIANTOWN FL 34956-3122

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-6924254

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

02/03/2000 90017 048 \$ 70.00



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CROSBY, JAMES
11500 S.W. KANNER HIGHWAY #314
INDIANTOWN FL 34956

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

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 D
NAME CROSBY, JAMES
STREET ADDRESS 11500 S.W. KANNER HIGHWAY #314
CITY-ST-ZIP INDIANTOWN FL 34956 ☐ Delete

TITLE D
NAME BOARD MEMBER
STREET ADDRESS MIKE FOWLER
CITY-ST-ZIP 11500 S.W. KANNER HWY. #314
INDIANTOWN FL 34956 ☐ Change ☒ Addition

TITLE D
NAME CROSBY, LINDA
STREET ADDRESS 11500 S.W. KANNER HIGHWAY #314
CITY-ST-ZIP INDIANTOWN FL 34956 ☐ Delete

TITLE D
NAME SECRETARY
STREET ADDRESS Stephanie Fowler
CITY-ST-ZIP 11500 S.W. Kanner Hwy # 314
INDIANTOWN, FL 34956 ☐ Change ☒ Addition

TITLE D
NAME COMBS, LEE
STREET ADDRESS 2357 S.W. WYNNEWOOD ST.
CITY-ST-ZIP PORT ST. LUCIE FL 34953 ☒ Delete

TITLE D
NAME Treasurer
STREET ADDRESS Linda Crosby
CITY-ST-ZIP 11500 S.W. Kanner Hwy. #314
Indiantown, FL 34956 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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: Linda Crosby

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

861-597-5306

CR2E037 (9/99)