2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2000 8:00 am
Secretary of State
05-18-2000 90356 013 ***150.00

DOCUMENT # N99000006431

1. Entity Name

THE LORD IS HERE, INC.

Principal Place of Business	Mailing Address
3600 S.W. 20TH AVENUE. #5 GAINESVILLE FL 32607-4439	P.O. BOX 12791 GAINESVILLE FL 32604-0791

DO NOT WRITE IN THIS SPACE

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 59-3606130 ☐ Applied For ☐ Not Applicable

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
ETHERIDGE, ALBERT JR 3600 S.W. 20TH AVENUE, #5 GAINESVILLE FL 32607-4439	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 _____ 4-15-2000
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	☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☑ Addition Albert Etheridge, Jr. 3600 SW 20TH AVE #5 Gainesville, FL 32607-4439
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☑ Addition Brian E Wallace 2851 SE #W941 Morriston, FL 32668
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☑ Addition Kenneth J. Rodriguez 205 SE 16th BLVD #BB Gainesville, FL 32601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☑ Addition Michael A. Patz 6434 NW 29th Terr Gainesville, FL 32653
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/99)

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 Albert L. Etheridge Jr. 4-15-2000 352-318-2887
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #