

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000006431

FILED  
Sep 17, 2003  
Secretary of State

Entity Name: THE LORD IS HERE, INC.

## Current Principal Place of Business:

3600 S.W. 20TH AVENUE, #5  
GAINESVILLE, FL 326074439

## New Principal Place of Business:

3536 NW 8TH AVENUE  
GAINESVILLE, FL 32605

## Current Mailing Address:

P.O. BOX 12791  
GAINESVILLE, FL 326040791

## New Mailing Address:

FEI Number: 59-3606138      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ETHERIDGE, ALBERT JR  
3600 S.W. 20TH AVENUE, #5  
GAINESVILLE, FL 326074439 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: D      ( ) Delete  
Name: ETHERIDGE, ALBERT  
Address: 3600 SW 20TH AVE.  
City-St-Zip: GAINESVILLE, FL 32607

Title: D      ( ) Delete  
Name: RODRIGUEZ, KENNETH  
Address: 205 SE 16TH BLVD #88  
City-St-Zip: GAINESVILLE, FL 32653

Title: D      ( ) Delete  
Name: KUHR, NORMA  
Address: 403 NW 21ST DR  
City-St-Zip: GAINESVILLE, FL 32605

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

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

Title: D      ( ) Delete  
Name: POLK, MARIE  
Address: POB 307  
City-St-Zip: STARKE, FL 32091

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D      (X) Change ( ) Addition  
Name: POLK, MARIE  
Address: POB 307  
City-St-Zip: STARKE, FL 32091

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: NA      (X) Change ( ) Addition  
Name: NA, NA  
Address: NA  
City-St-Zip: NA, NA NA

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: ALBERT ETHERIDGE

D

09/17/2003

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date