

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000006593

FILED
Jan 22, 2002 8:00 AM
Secretary of State

Entity Name: FELLOWSHIP FOR INTERNATIONAL REVIVAL AND EVANGELISM INC.

Current Principal Place of Business:

4000 W. FAIRFIELD DRIVE
PENSACOLA, FL 32505 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 36417
PENSACOLA, FL 32516

New Mailing Address:

FEI Number: 59-3613715 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETERS, WILLIAM E
4118 ERIKA CT
PENSACOLA, FL 32526

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: PD () Delete
Name: BROWN, MICHAEL L DR.
Address: 12461 RED CLOUD DRIVE
City-St-Zip: PENSACOLA, FL 32570

Title: VD () Delete
Name: GLADSTONE, ROBERT
Address: 7185 RAMPART WAY
City-St-Zip: PENSACOLA, FL 32505

Title: STD () Delete
Name: COLLINS, KEITH
Address: 5653 ESPERANTO
City-St-Zip: PENSACOLA, FL 32526

Title: T () Delete
Name: COLLINS, D. KEITH
Address: 5653 ESPERANTO
City-St-Zip: PENSACOLA, FL 32526

Title: D () Delete
Name: GLADSTONE, ROBERT J
Address: 7185 RAMPART WAY
City-St-Zip: PENSACOLA, FL 32516

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BROWN, MICHAEL L DR.
Address: 20254 SWEET WATER LOOP
City-St-Zip: SEMINOLE, AL 36574

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

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

Title: T (X) Change () Addition
Name: PETERS, WILLIAM E DR
Address: 4118 ERIKA COURT
City-St-Zip: PENSACOLA, FL 32526

Title: D (X) Change () Addition
Name: CAVA, MARIO J
Address: 32246 BARTEL ST
City-St-Zip: ELBERTA, AL 32530

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: WILLIAM E. PETERS

T

01/22/2002

Electronic Signature of Signing Officer or Director

_____ Date