

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000006842

FILED  
Jan 23, 2002 8:00 AM  
Secretary of State

**Entity Name:** JO ANNA WORTHINGTON MINISTRIES, INC.

**Current Principal Place of Business:**

577 COMPTON COURT  
DELAND, FL 32724

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 246  
DELAND, FL 32721

**New Mailing Address:**

577 COMPTON COURT  
DELAND, FL 32724

**FEI Number:** 59-3610001

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

WORTHINGTON, JO ANNA  
577 COMPTON COURT  
DELAND, FL 32724

**Name and Address of New Registered Agent:**

SANDERS, MARTHA  
577 COMPTON COURT  
DELAND, FL 32724

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: MARTHA SANDERS

01/23/2002

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WORTHINGTON, JO ANNA  
Address: 577 COMPTON COURT  
City-St-Zip: DELAND, FL 32724

Title: VTD ( ) Delete  
Name: BROWN, H ROUND  
Address: 577 COMPTON COURT  
City-St-Zip: DELAND, FL 32724

Title: SD ( ) Delete  
Name: SANDERS, MARTHA  
Address: 783 GAINSBORO STREET  
City-St-Zip: DELTONA, FL 32725

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VTD (X) Change ( ) Addition  
Name: BROWN, H ROUMEL  
Address: 1313 NO ALABAMA AV  
City-St-Zip: DELAND, FL 32724

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

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: JOANNA WORTHINGTON

PD

01/23/2002

Electronic Signature of Signing Officer or Director

Date