

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # *1N99000007147*

1. Entity Name

Mary Thomas Ministries, Inc.

FILED

02 MAY 29 AM 11:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

215 Hwy 17 North

3. Mailing Address

P.O. BOX 697

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

PALATKA FL

City & State

PALATKA FL

4. FEI Number

59-3611983

Applied For

Not Applicable

Zip

32178

Country

Putnam

Zip

32178

Country

Putnam

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name *Mary L. Thomas*

Street Address (P.O. Box Number is Not Acceptable)

P.O. BOX 697

City

PALATKA

FL

Zip Code

32178

**DO NOT WRITE
IN THIS SPACE**

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

Mary L. Thomas

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

5/07/02

DATE

**FEE IS \$61.25
Initial or Amended UBR**

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PD	<i>Mary Thomas</i>	<i>402 W. Pine St</i>	<i>PALATKA, FL 32178</i>
SD	<i>Fm. Davis</i>	<i>Rt 6, Box 180 W. Pine St.</i>	<i>PALATKA, FL</i>
TD	<i>Maggie Haggis</i>	<i>404 South Cherry St</i>	<i>Burkeville, TN</i>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
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[Signature]

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Mary L. Thomas

CR2E037B (12/01)

MLT

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Mary Thomas Ministries, Inc.
P. O. Box 697 ~ Palatka, Florida ~ Putnam
Phone 386-325-4414

05/07/2002

~~Division Of Corp.~~

Attention: To whom it may concern

Our document number is N99000007147 We are seeking re-instatement due to the fact we have never receive an annual report; therefore we are asking you to wave our fees, and therefore, bringing us current to date.

Please send all Correspondence and future reports to P. O. Box 697, Palatka, FL.

Thank you in advance for your help.

Mary Thomas Ministries

Mary L. Thomas
President-Mary L. Thomas