

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000007525

FILED  
May 01, 2003  
Secretary of State

**Entity Name:** SOARING WITH POWER AND FREEDOM MINISTRIES, INC.

**Current Principal Place of Business:**

790 LA-PLAZA  
ST. PETERSBURG, FL 33707

**New Principal Place of Business:**

7421 69TH STREET EAST  
PALMETTO, FL 34221

**Current Mailing Address:**

PO BOX 1063  
ELLENTON, FL 34222

**New Mailing Address:**

**FEI Number:** 65-0570718

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

POPE, ROGER  
POST OFFICE BOX 1063  
ELLENTON, FL 34222

**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: P ( ) Delete  
Name: POPE, ROGER C  
Address: POST OFFICE BOX 1063  
City-St-Zip: ELLENTON, FL 34222

Title: D ( ) Delete  
Name: POPE, LAURA A  
Address: POST OFFICE BOX 1063  
City-St-Zip: ELLENTON, FL 34222D

Title: SD ( ) Delete  
Name: POPE, LINDA  
Address: HC71 BOX 8698  
City-St-Zip: KINARD, FL 32449

Title: TD ( ) Delete  
Name: POPE, ROY  
Address: HC71 BOX 8698  
City-St-Zip: KINARD, FL 32449

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

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: ( ) 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: LAURA A POPE

D

05/01/2003

Electronic Signature of Signing Officer or Director

Date