2000 UNIFORM BUSINESS REPORT (UBR)

5/1

FILED
Jun 19, 2000 8:00 am
Secretary of State
05-17-2000 90938 037 ***150.00

DOCUMENT # P97000024899

1. Entity Name
SCRIPTURE WEAR, INC.

R

Principal Place of Business	Mailing Address
~~566 BARTON BLVD.~~ SUITE 2 ROCKLEDGE FL 32955 US	566 BARTON BLVD. SUITE 2 ROCKLEDGE FL 32955-3100 US

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
563 Barton Blvd	563 Barton Blvd
Suite, Apt. #, etc. Suite #18	Suite, Apt. #, etc. Suite #18
City & State Rockledge FL 32955	City & State Rockledge FL 3
Zip 32955 / Country Brevard	Zip 32955 / Country Brevard

4. FEI Number 59-3431129 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ARTHUR, DONALD G. 566 BARTON BLVD. SUITE 2 ROCKLEDGE FL 32955	Name: Arthur, Donald, G. Street Address (P.O. Box Number is Not Acceptable): 563 Barton Blvd Suite #18 City: Rockledge FL Zip Code: 32955

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: Donald G. Arthur Donald G. Arthur 2/16/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COMPTON, JAMES A 710 MISSOURI ST. MELBOURNE FL 32904	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COMPTON, CHARLENE D. 710 MISSOURI AVE MELBOURNE FL 32904	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Pres-Tres. ARTHUR, DONALD G. 7136 CARILLON AVE. COCOA FL 32927	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pres-Tres Arthur, Donald G. 7136 Carillon Ave Cocoa FL 32927 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D V.P.-Sec. ARTHUR, LISA J 7136 CARILLON AVE. COCOA FL 32927	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P.-Sec Arthur Lisa J 7136 Carillon Ave Cocoa FL 32927 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Dir. Niles P. Arthur 827 Pine Meadows Rd. ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/99)

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Donald G. Arthur 2/16/00 321-638-9900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #