

3/13/

FILED
Mar 29, 2001 8:00 am
Secretary of State

03-13-2001 90061 033 ****61.25

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 701589

1. Entity Name

THE NON-DENOMINATIONAL CHURCH OF THE LIVING GOD.

Principal Place of Business

2251 NORTHWEST 48TH TERRACE
BLVD 7, SUITE 102
LAUDERHILL FL 33313

Mailing Address

2251 NW 48TH TERR
BLDG 7, APT 102
LAUDERHILL FL 33313
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

912 N.W. 2nd St.
Ft. Lauderdale, Fla.

Suite, Apt. #, etc.

912 N.W. 2nd St.
Ft. Lauderdale, Fla. 33311

City & State

Zip 33311

Country

Broward

City & State

Zip

Country

Broward

4. FEI Number

70-1589160

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

TRIPP, SANDRA L.
2060 21ST STREET S.W.
NAPLES FL 33964

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD Delete
NAME HUNTER, L. M.
STREET ADDRESS 2251 NW 48TH TERR
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE A D Delete
NAME DEVOE, L R
STREET ADDRESS 912 NW 2ND STREET
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D Delete
NAME FORD, ANNIE MAE
STREET ADDRESS 3201 NW 4TH PLACE
CITY-ST-ZIP FORT LAUDERDALE FL

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD Delete
NAME DEVOE, L O
STREET ADDRESS 912 NW 2ND. STREET
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P Delete
NAME ANDERSON, CAROLYN
STREET ADDRESS 2061 N.W. 47TH TERR. APT.414 BLDG 17
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P Delete
NAME MITCHELL, MILLIEA
STREET ADDRESS 2201 N.W. 166TH ST.
CITY-ST-ZIP OPA LOCKA FL 33054

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

~~SIGNATURE REQUIRED~~
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-13-01

Date

954-463-7525

Daytime Phone #

CPRE037 (10/00)