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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 715485 (9)

1. Corporation Name

UNIVERSITY CHRISTIAN CHURCH OF SOUTH MIAMI, FLORIDA, INC.

Principal Place of Business	Mailing Address
6750 SUNSET DR S MIAMI FL 33143	6750 SUNSET DR S MIAMI FL 33143-4514

3. Date Incorporated or Qualified: 10/30/1968
3a. Date of Last Report: 06/12/1996

2. Principal Place of Business — 21:
Suite, Apt. #, etc. — 22:
City & State — 23:
Zip — 24: Country — 25:

2a. Mailing Address — 26:
Suite, Apt. #, etc. — 27:
City & State — 28:
Zip — 29: Country — 30:

4. FEI Number: 59-6137393 ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

KIRSCH, FRED
7805 SW 120 PL
MIAMI FL 33183

10. Name and Address of New Registered Agent

81 Name: BRUCE LARSON
82 Street Address (P.O. Box Number is Not Acceptable): 9321 S.W. 104 Ct.
83:
84 City: MIAMI FL 85 Zip Code: 33176

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: BRUCE G LARSON — Bruce G Larson — 6/25/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VD	☒ DELETE	1.1 TITLE	VD	☐ Change ☑ Addition
NAME	MIHM, ROBERT		1.2 NAME	JAMES SMITH	
STREET ADDRESS	9251 SW 70 ST		1.3 STREET ADDRESS	12860 S.W. 43 Drive ~#247-B	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	MIAMI, FL 33175	
TITLE	CD	☒ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BRUCE LARSON		2.2 NAME		
STREET ADDRESS	9321 SW 104 CT.		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP		
TITLE	SD	☒ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	WILSON, FRANCES		3.2 NAME		
STREET ADDRESS	7731 S.W. 57TH AVE. #1		3.3 STREET ADDRESS		
CITY-ST-ZIP	MAIMI FL		3.4 CITY-ST-ZIP		
TITLE	TD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	LARSON, SANDRA		4.2 NAME		
STREET ADDRESS	9321 SW 104 CT		4.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33176		4.4 CITY-ST-ZIP		
TITLE	CD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	ROBIN TEAGARDEN, JR		5.2 NAME		
STREET ADDRESS	9251 SW 70 ST		5.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33173-2328		5.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	REBECCA M. TEAGARDEN		6.2 NAME		
STREET ADDRESS	9251 SW 70 ST		6.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33173-2328		6.4 CITY-ST-ZIP		

CR2E037 (9/96)

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [illegible] PRESIDENT