

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2003 8:00 am
Secretary of State

04-04-2003 90136 008 ****61.25

DOCUMENT # 735422

1. Entity Name
GATEWAY CHURCH, INC.



Principal Place of Business

**2130 N.W. 26TH STREET
FT. LAUDERDALE FL 33311**

Mailing Address

**2130 N.W. 26TH STREET
FT. LAUDERDALE FL 33311**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2508633**

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

**HYATT, NOEL GEORGE
4420 NW 5TH PLACE
PLANTATION FL 33317**

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRISSETT, ELTON 8337 NW 26TH STREET SUNRISE FL 33322	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLLINS, VEROL 4120 INVERRARY DR LAUDERHILL FL 33319	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCDONALD, DEVEROUX 12084 NW 42ND ST SUNRISE FL 33322	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCNICHOL, LENIVA 7531 NW 79TH AVE., #205 TAMARAC FL 33321	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HYATT, NESTA R 4420 NW 5TH PLACE PLANTATION, FL 33317	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD POWELL, JACQUELINE 5941 NW 45 AVE TAMARAC, FL 33319	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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

3/29/2003 954.485.7012

CR2E037 (10/02)