2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED **DOCUMENT # N25776** Jul 25, 2000 8:00 am Secretary of State 1. Entity Name GETHSEMANE MISSIONARY BAPTIST CHURCH, INC. 07-25-2000 90103 002 ****61.25 Principal Place of Business Mailing Address 2409 NW 79TH STREET 2409 NW 79TH STREET MIAMI FL 33147-4929 MIAMI FL 33147-4929 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-0884031 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) EDWARDS, T.J. 2409 N.W. 79TH ST. **MIAMI FL 33149** City 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 \$5,00 May Be Make Check Payable to Trust Fund Contribution. After September 13, 2000 min. will be \$236.25 Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE Change ☐ Addition EDWARD, T.J. NAME NAME STREET ADDRESS STREET ADDRESS 9968 NW 25TH AVE. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL TITLE CD ☐ Delete TITLE Change ☐ Addition NAME HENRY, EUGENE NAME STREET ADDRESS 2508 N.W. 104 TER STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change ☐ Addition TITLE Delete TITLE WASHINGTON, OSIE NAME NAME STREET ADDRESS STREET ADDRESS 1670 N.W. 85 ST CITY-ST-7IP CITY-ST-79 MIAMI FL SD TITLE ☐ Delete TITLE Change Addition KITTLES, RUBY NAME NAME STREET ADDRESS STREET ADDRESS 5501 N.W. 175 ST. C!TY-ST-ZIP CITY-ST-ZIP OPA LOCKA FL TD Zeima Griffin 3169 NW 445+ Addition TITLE Delete TITLE Change NAME WILLIAMS, CHARLIE III NAME STREET ADDRESS 16810 NW 39TH COURT STREET ADDRESS CITY-ST-ZIP NIAMI FL 33142 CITY-ST-ZIP OPA-LOCKA FL TITI F ☐ Delete TITI F Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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