

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 25, 2002 8:00 am**  
**Secretary of State**

03-25-2002 90128 020 \*\*\*\*61.25

0018663

**DOCUMENT # N30043**

1. Entity Name

**THE SALVATION AND PRAISE TEMPLE OF FAITH, INC.**

Principal Place of Business

Mailing Address

252 NE 29 ST.  
 C/O JOHNNY L ZANDERS  
 POMPANO BEACH FL 33064

1588 NW 4TH AVE  
 C/O JOHNNY L ZANDERS  
 POMPANO BEACH FL 33060  
 US

2. Principal Place of Business

3. Mailing Address

2855 NW 4<sup>th</sup> ST

2855 NW 4<sup>th</sup> ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

c/o Johnny L. Zanders

City & State  
 Pompano Beach, FL

City & State  
 Pompano Beach, FL

4. FEI Number  
 65-0114888

Applied For  
 Not Applicable

Zip  
 33069

Country  
 Broward

Zip  
 33069

Country

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

ZANDERS, JOHNNY L.  
 1588 NW 4TH AVE  
 POMPANO BEACH FL 33060

Name  
 ZANDERS, JOHNNY L.

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

2855 NW 4<sup>th</sup> ST

City  
 Pompano Beach FL Zip Code  
 33069

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

*Johnny L. Zanders Sr.*

3/13/02

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  Delete  
 NAME D  
 ZANDERS, JOHNNY L.  
 STREET ADDRESS 1588 NW 4TH AVE  
 CITY-ST-ZIP POMPANO BEACH FL 33060

TITLE  Change  Addition  
 NAME ZANDERS, JOHNNY L.  
 STREET ADDRESS 2855 NW 4<sup>th</sup> ST  
 CITY-ST-ZIP Pompano Beach, FL 33060

TITLE  Delete  
 NAME D  
 ZANDERS, HAZEL KIRKLAND  
 STREET ADDRESS 10315 NW 39TH MANOR  
 CITY-ST-ZIP CORAL SPRINGS FL

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME D  
 JOHNSON, LONNIE  
 STREET ADDRESS 2643 NW 8TH STREET  
 CITY-ST-ZIP POMPANO BEACH FL

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME D  
 JOHNSON, SUSIE  
 STREET ADDRESS 2643 NW 8TH STREET  
 CITY-ST-ZIP POMPANO BCH. FL

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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: *JOHNNY L. ZANDERS Sr.* *Johnny L. Zanders Sr.* 3/13/02 (954-366-4707)

CR2E037 (9/01)