

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

FILED
Apr 18, 2003 8:00 am
Secretary of State

04-18-2003 90202 043 ****61.25

DOCUMENT # N95000001876

1. Entity Name
COUPLES FOR CHRIST, INC.



Principal Place of Business
**918 MARGINAL ROAD
WEST PALM BEACH FL 33411**

Mailing Address
**918 MARGINAL ROAD
WEST PALM BEACH FL 33411**

10030000



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0683561**

Applied For
Not Applicable

Zip

Country

Zip

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

**DURAN, JOSE O
918 MARGINAL ROAD
WEST PALM BEACH FL 33411**

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, or 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	TP DURAN, JOSE O 918 MARGINAL RD WEST PALM BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TV SANTAYANA, GLEN 3094 MARION AVE MARGATE FL 33063	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS BENITEZ, RAFAEL 2753 SW 133RD AVE MIRAMAR FL 33027	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TT NAVARRO, RAYMUNDO 8156 NW 201TH TERR MIAMI FL 33015	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GOMEZ, LITO T 3009 NW 120 WAY SUNRISE FL 33323	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TT MASINSIN, ROBE 13225 CURRITUCK DR JACKSONVILLE FL 32225	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS BARLAAN, ARTHUR 3506 COUNTRY CREEK LANE VALRICO, HILLSBOROUGH FL 33594	☐ 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

4/15/03

561 793 0815

CR2E037 (10/02)