

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2001 8:00 am
Secretary of State

05-02-2001 90134 015 ****61.25

DOCUMENT # N95000002561
 1. Entity Name
TRINITY PENTECOSTAL DELIVERANCE CHURCH OF GOD, I

Principal Place of Business Mailing Address
3788 SW 40TH ST **3788 SW 40TH ST**
HOLLYWOOD FL 33023 **HOLLYWOOD FL 33023**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State

4. FEI Number Applied For
11-2653554 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
DOLNIER, PAUL M
DOLNIER & ASSOCIATES
609 NORTH EAST 123RD STREET
NORTH MIAMI FL 33161

7. Name and Address of New Registered Agent
 Name **Pastor Alice Monroe President**
 Street Address (P.O. Box Number is Not Acceptable)
3788 S.W. 40th Street
 City **Hollywood** **FL** Zip Code **33023**

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 *Alice Monroe* DATE 4/23/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete COBB, COLLENE PO BOX 640853 (N/A)* MIAMI BEACH FL 33164
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete NEWLAND, RUPERT 3788 SOUTH WEST 40TH STREET HOLLYWOOD FL 33023
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete MONROE, ALICE 3788 SOUTH WEST 40TH STREET HOLLYWOOD FL 33023
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete WALLACE, JANICHTH 3789 SOUTH WEST 40TH STREET HOLLYWOOD FL 33023
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete WATSON, DAPHNE 3788 SOUTH WEST 40TH STREET HOLLYWOOD FL 33023
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete RITA COKE 6032 BUCHANAN ST HOLLYWOOD FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Sandy Davis 3405 S.W. 64 ave Miami FL 33023
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition Mar-Jonie Tomlinson 961 N.W. 181 Street Miami FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Pastor Alice Monroe* DATE 4/23/01 DAYTIME PHONE # 954 964 1382
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)