

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000000985

1. Entity Name

United Worship Center, Inc.

FILED

01 FEB -6 AM 9:00

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Principal Place of Business

Mailing Address

109 NW 14<sup>th</sup> Street  
Pompano Beach, FL  
33060

2. Principal Place of Business

2411 NW 14<sup>th</sup> COURT

Suite, Apt. #, etc.

3. Mailing Address

PO Box 2405

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Fort Lauderdale, FL

City & State

Pompano Beach, FL

4. FEI Number

050891820

Applied For

Not Applicable

Zip  
33311

Country  
U.S.A.

Zip  
33060

Country  
U.S.A.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Izell Williams  
1773 NW 6<sup>th</sup> Terrace  
Pompano Beach, FL  
33060

7. Name and Address of New Registered Agent

Name Warren Pitts  
Street Address (P.O. Box Number is Not Acceptable)  
4801 NW 19<sup>th</sup> COURT  
City LAuderhill FL Zip Code 33313

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 *Warren Pitts*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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\*\*\*\*\*61.25 \*\*\*\*\*61.25

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 D  
NAME Izell Williams  Delete  
STREET ADDRESS 1773 NW 6<sup>th</sup> Terrace  
CITY-ST-ZIP Pompano Beach, FL 33060

TITLE D  
NAME John Smith  Delete  
STREET ADDRESS 1773 NW 6<sup>th</sup> Terrace  
CITY-ST-ZIP Pompano Beach, FL 33060

TITLE D  
NAME Dale Rhome  Delete  
STREET ADDRESS 1773 NW 6<sup>th</sup> Terrace  
CITY-ST-ZIP Pompano Beach, FL 33060

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D  
NAME Warren Pitts  Change  Addition  
STREET ADDRESS 4801 NW 19<sup>th</sup> COURT  
CITY-ST-ZIP LAuderhill, FL 33313

TITLE D  
NAME Dolphin Alford  Change  Addition  
STREET ADDRESS 2217 SW 5<sup>th</sup> Place  
CITY-ST-ZIP Ft. Lauderdale, FL 33312

TITLE T  
NAME Patricia Storr  Change  Addition  
STREET ADDRESS 125 SW 8<sup>th</sup> COURT  
CITY-ST-ZIP Delray, FL 33444

TITLE T  
NAME Temequia Page  Change  Addition  
STREET ADDRESS 4605 NW 15<sup>th</sup> COURT  
CITY-ST-ZIP Tamarac, FL 33319

TITLE Elizabeth Pitts  Change  Addition  
NAME Elizabeth Pitts  
STREET ADDRESS 4801 NW 19<sup>th</sup> COURT  
CITY-ST-ZIP LAuderhill, FL 33313

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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\*\*\*\*\*8.75 \*\*\*\*\*8.75

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: *John C. Smith*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-31-2001

Date Daytime Phone #

CR2E037 (11/00)