2002 UNIFORM BUSINESS REPORT (UBR)

Mar 25, 2002 8:00 am Secretary of State **DOCUMENT # 721774** 1. Entity Name 03-25-2002 90117 028 ****61.25 PLAUDERDALE MANORS CHURCH OF THE NAZARENE, INC. Principal Place of Business Mailing Address 1518 NW 15TH AVE. 1518 NW 15TH AVE. FT. LAUDERDALE FL 33311 FT. LAUDERDALE FL 33311 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 NOT APPLICABLE Not Applicable Zip Zìp Country Country \$8.75 Additional 5. Certificate of Status Desired П 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) WALKER, BARRY 1619 NW 12TH AVE FT. LAUDERDALE FL 33311 Zip Code FL 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 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. DDE □ Delete TITLE ☐ Change ☐ Addition JOHNSON, JEAN-ANN NAME NAME 6325 NW 43RD TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **COCONUT CREEK FL 33073** TITI F ☐ Addition □ Delete ☐ Change TITLE WRIGHT, ROYSTON NAME NAME 7100 NW 21ST CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP SUNRISE FL 33313 ☐ Delete ☐ Change ☐ Addition TITLE TITLE **PURINTON, JUANITA** NAME NAME 2407 S.E. 15TH ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL TITLE ☐ Delete TITLE Change ☐ Addition JOHNSON, FRANKLYN NAME NAME 6325 NW 43RD TERRACE STREET ADDRESS STREET ADDRESS COCONUT CREEK FL 33073 CITY-ST-ZIP CITY-ST-7IP Delete Change ☐ Addition TITLE TITLE RASBERRY, JEAN NAME NAME 16920 NE 6TH CT STREET ADDRESS STREET ADDRESS NORTH MIAMI BEACH FL 33162 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE BOMPART, REV. CARL S. NAME NAME STREET ADDRESS 1877 NW 96TH AVE STREET ADDRESS PLANTATION FL 33322 CITY-ST-ZIP

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

SIGNATURE: