

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

FILED
Jan 09, 2003 8:00 am
Secretary of State

01-09-2003 90106 044 ****61.25

DOCUMENT # N01000001117

1. Entity Name

MEC MINISTRIES OF FT. LAUDERDALE, INC.



Principal Place of Business

**1711 NW 38TH AVE
LAUDERHILL FL 33313**

Mailing Address

**1711 NW 38TH AVE
LAUDERHILL FL 33313**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-1031438**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

NELSON, EULA

**~~1420 NW 20TH CT #A~~ 3961 NW 34 AVENUE
~~FT LAUDERDALE FL 33311~~ LAUDERDALE LKS, FL 33309**

7. Name and Address of New Registered Agent

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 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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **DP** ☐ Delete
NAME **KEMP, OTIS L**
STREET ADDRESS **3910 NW 177 STREET**
CITY-ST-ZIP **CAROL CITY FL 33055**

TITLE **DV** ☐ Delete
NAME **KEMP, VIVIAN E**
STREET ADDRESS **3910 NW 177 STREET**
CITY-ST-ZIP **CAROL CITY FL 33055**

TITLE **D** ☐ Delete
NAME **SMITH, NATHAN**
STREET ADDRESS **4856 NW 1ST STREET**
CITY-ST-ZIP **PLANTATION FL 33317**

TITLE **DT** ☐ Delete
NAME **VAN-REIL, KARL**
STREET ADDRESS **7607 W 40 STREET**
CITY-ST-ZIP **CORAL SPRINGS FL 33065**

TITLE **DS** ☐ Delete
NAME **WILSON, CASSANDRA**
STREET ADDRESS **37 SW 18 AVE**
CITY-ST-ZIP **FT LAUDERDALE FL 33312**

TITLE **D** ☐ Delete
NAME **WATSON, JOHN**
STREET ADDRESS **1444 NW 5 AVENUE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33311**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Change ☒ Addition
NAME **WOMACK, ANGELA**
STREET ADDRESS **1540 NW 33 TERRACE**
CITY-ST-ZIP **FT LAUDERDALE FL 33311**

TITLE **D** ☐ Change ☒ Addition
NAME **WOMACK, BRENDA**
STREET ADDRESS **790 NW 38 STREET**
CITY-ST-ZIP **OAKLAND PARK, FL 33309**

TITLE **D** ☐ Change ☒ Addition
NAME **COLEMAN, DORIS**
STREET ADDRESS **4840 NW 16 COURT**
CITY-ST-ZIP **LAUDERHILL FL 33313**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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: **Eula Nelson** L-5-03 954-484-7743

CR2E037 (10/02)