

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 19, 2001 8:00 am
Secretary of State

03-19-2001 90074 018 ****61.25

DOCUMENT # 700788

1. Entity Name

MERRELL UNITED METHODIST CHURCH, INC.

Principal Place of Business

**3900 N STATE RD 7
 FT LAUDERDALE FL 33319-1877**

Mailing Address

**3900 N STATE RD 7
 FT LAUDERDALE FL 33319-1877**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1099703

Applied For

Not Applicable

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

**LOBBAN, RUBY
 3900 N STATE RD 7
 FT LAUDERDALE FL 33319**

Name **Harry R. Hoston**

Street Address (P.O. Box Number is Not Acceptable)
3900 N. State Road 7

City **Ft. Lauderdale**

FL

Zip Code
33319

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

3/14/01

**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCKAIL, LOVELLE 3920 NW 50 AVE LAUDERDALE LAKES FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROYLES, THELMA 3489 NW 24TH STREET FT LAUDERDALE FL 33311	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HENRY, HYACINTH 4840 NW 17TH CT LAUDERHILL FL 33311	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PALMER, LORENZO 8100 SW 22ND ST., #311 FT. LAUDERDALE FL 33325	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLS, SYLVESTER 3473 NW 44 ST FT. LAUDERDALE FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS WRAY, HUBERT 4370 NW 46 TERR LAUDERDALE LAKES FL 33311	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Franklyn Coombs 3131 NW 41 Street Ft. Lauderdale, Fl. 33309-4934
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Benson Ellis 4301 NW 24 Street Ft. Lauderdale, Fl. 33313-3618
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Althea Farrelly 500 SW 75 Avenue Ft. Lauderdale, Fl. 33068-0008
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Josephine Olden 3774 Inverrary Blvd, #110 Ft. Lauderdale Fl. 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition DS Kendall M. Taylor P.O. Box 740876 Boynton Bch, Fl. 33474-0876

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-14-01 954/731-2323

CR2E037 (10/00)