

# 2002 UNIFORM BUSINESS REPORT (UBR)

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

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

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

HOSTON, HARRY R  
3900 N STATE RD 7  
FT LAUDERDALE FL 33319

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.

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  
Department of State

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
COOMBS, FRANKLYN  
3131 NW 41 STREET  
FORT LAUDERDALE FL 33309

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
ELLIS, BENSON  
4301 NW 24 ST  
FORT LAUDERDALE FL 33313

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
FARRELLY, ALTHEA  
500 SW 75 AVE  
FT. LAUDERDALE FL 33068

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
OLDEN, JOSEPHINE  
3774 INVERRARY BLVD # 110  
FORT LAUDERDALE FL 33319

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DS  
TAYLOR, KENDALL M  
P.O. BOX 740876  
BOYNTON BEACH FL 33474

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DS  
WRAY, HUBERT  
4370 NW 46 TERR  
LAUDERDALE LAKES FL 33311

☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
Thelma Reyes  
3489 NW 24 St.  
Ft. Lauderdale, FL 33311

☐ Change

☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ 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:

SIGNATURE REQUIRED

2-15-02 754-731-2323



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)