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

FILED
Jan 31, 2003 8:00 am
Secretary of State
01-31-2003 90369 026 ****61.25

DOCUMENT # 700971

1. Entity Name
FIRST UNITED CHURCH of CHRIST, INC.

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90014525

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2. Principal Place of Business	3. Mailing Address
Hollywood	200 N 46th Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Hollywood, FL	City & State: Hollywood, FL
Zip: 33021	Zip: 33021
Country: ~~[illegible]~~ US	Country: US

4. FEI Number: 59-1111742 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: VICTOR SWACKHAMMER

Street Address (P.O. Box Number is Not Acceptable): 5645 FORREST ST.

City: Hollywood FL Zip Code: 33021

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FEE IS $61.25 Initial or Amended UBR

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	MD	
NAME	ZBIERAJEWSKI, KAZIMIERZ	
STREET ADDRESS	3170 NW 93 Ave	
CITY-ST-ZIP	SUNRISE, FL 33351	
TITLE	TRT	
NAME	MENGERSEN, NESHA	
STREET ADDRESS	114 BRIARWOOD CIRCLE	
CITY-ST-ZIP	HOLLYWOOD, FL 33024	
TITLE	TRT	
NAME	GARDNER JAMES	
STREET ADDRESS	2402 Carlyle Lane	
CITY-ST-ZIP	Hollywood, FL 33021	
TITLE	ST	
NAME	ZBIERAJEWSKI, NANCY	
STREET ADDRESS	3170 NW93 Ave	
CITY-ST-ZIP	SUNRISE, FL 33351	
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CR2E037B (12/02)

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 on an attachment with an address with all other like empowered.

SIGNATURE: Victor Swackhammer 1-29-03 954-983-2609
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #