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

DOCUMENT # 702013



FILED

1. Entity Nan FIRST PR DA		CHURCH OF D	ELRAY E	BEACH, FLOR	n				04	I-28-2003	3 90500 01	0 ****61.2	25	
33 GLEASON STREET 33 GL				ailing Address GLEASON STREET LRAY BEACH FL 33483										
2. Principal F	Place of Business	 	3. Mailir	ng Address		 ,								
Suite, Apt. #, etc. Si				uite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES						
City & Stat	te		City & State					4. FEI Number 59-0830740				<u> </u>	Applied For Not Applicable	
Zip		Country	Zip		Coun	itry				tus Desired		\$8.75 Add Fee Require	d	
6. Name and Address of Current Registered Agent								7. Name	and Addr	ess of New	Registered'	Agent		
3952 GR	OBERT C EEN FOREST DI N BEACH FL 33) - -	Name Street A	ddress (F	P.O. Box N	umber is N	ot Acceptat	ole)			
					-	City					FL	Zip Cod	е	
	e named entity sub tions of registered	mits this statement for agent.	the purpo	se of changing its	registered	d office or	registere	ed agent, o	or both, in t	ne State of f	Torida. I am	familiar with,	and accept	
SIGNATURE		ed name of registered agent a	nd title if applic	able. (NOTE	E: Registered /	Agent signatu	ıre required	when reinstatir	ng)		DATE	·		
	FILE NOW: FE		9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees Make Check Filorida Departm							
10.		OFFICERS AND DIR	ECTORS		11.		A	DDITIONS	/CHANGE	S TO OFFIC	ERS AND DI	RECTORS IN	10	
NAME	D Barding, Jer 711 SE 3RD S DELRAY BEAC	Γ		☐ Delete	TITLE NAME STREET CITY-S	ADDRESS ST-ZIP		,				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BARTHOLOME 6665 N. OCEA OCEAN RIDGE	n BLVD.		☐ Delete	TITLE NAME STREET CITY-S	ADDRESS			· ·			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SOUDER, SUS 555 BANYAN F GILF STREAM	ND O		☐ Delete	TITLE NAME STREET CITY-S	ADDRESS IT-ZIP		·				Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS MOSS, ROBER 3952 GREEN F BOYNTON BE/	OREST DR		☐ Delete	TITLE NAME STREET CITY-S	ADDRESS ST-ZIP						☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TANNER, ROBI 103 ORCHARD BOCA RATON	ERT L RIDGE LANE		☐ Delete	TITLE NAME STREET CITY-S	ADDRESS T-ZIP				***		☐ Change	Addition	
TITLE NAME STREET ADDRESS	D FISHER, JAME 3619 SW 23RD	S DR.		Delete	TITLE NAME STREET	ADDRESS				s DR	L. T Cou	□ 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:

1561