

2002 UNIFORM BUSINESS REPORT (UBR)

0071536

DOCUMENT # 702432

1. Entity Name

HOMESTEAD CHURCH OF CHRIST, INC.

FILED

02 OCT 21 AM 9:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
17700 SW 280 ST HOMESTEAD FL 33031-3309	17700 SW 280 ST HOMESTEAD FL 33031-3309

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	Applied For
59-1195180	<input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input checked="" type="checkbox"/>	

6. Name and Address of Current Registered Agent

BRAY, DORRIS
1848 SW 295 TERR
HOMESTEAD FL 33030

7. Name and Address of New Registered Agent

Name: Smith, Paul
Street Address (P.O. Box Number is Not Acceptable):
19877 E. Country Club Dr # 602
City: Aventura FL. Zip Code: 33180

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: *Paul J. Smith* (Signature, typed or printed name of registered agent and title if applicable)

DATE: 01-28-02 (Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

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: PD NAME: BRAY, DORRIS STREET ADDRESS: 18485 SW 295TH TERR CITY-ST-ZIP: HOMESTEAD FL 33030	<input checked="" type="checkbox"/> Delete
TITLE: TD NAME: MILBURN, BRIAN STREET ADDRESS: 323 SW 4 STREET CITY-ST-ZIP: FLORIDA CITY FL 33034	<input checked="" type="checkbox"/> Delete
TITLE: VD NAME: VORNLOCKER, DUANE STREET ADDRESS: 16100 SW 304TH TERR CITY-ST-ZIP: HOMESTEAD FL 33033	<input checked="" type="checkbox"/> Delete
TITLE: SD NAME: MEREDITH, KEVIN STREET ADDRESS: 19800 SE 180TH AVE #310 CITY-ST-ZIP: MIAMI FL 33187	<input type="checkbox"/> Delete
TITLE: [Blank] NAME: [Blank] STREET ADDRESS: [Blank] CITY-ST-ZIP: [Blank]	<input type="checkbox"/> Delete
TITLE: [Blank] NAME: [Blank] STREET ADDRESS: [Blank] CITY-ST-ZIP: [Blank]	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: SD NAME: Smith, Paul STREET ADDRESS: 19877 E Country Club Dr #602 CITY-ST-ZIP: Aventura FL. 33180	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: VD NAME: Robinson, Julie STREET ADDRESS: 513 NW 5th Ave APT 1023 CITY-ST-ZIP: Florida City Fla. 33034	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: TD NAME: Parker, Joseph E STREET ADDRESS: 14830 Naranja Lakes Blvd. CITY-ST-ZIP: APT 11A Naranja FL 30032	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: PD NAME: Meredith, Clyde STREET ADDRESS: 19800 SW 180th Ave #310 CITY-ST-ZIP: MIAMI FL 33187	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: [Blank] NAME: [Blank] STREET ADDRESS: 400008566474 CITY-ST-ZIP: 10/24/02--01040--022 **70.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: [Blank] NAME: [Blank] STREET ADDRESS: [Blank] CITY-ST-ZIP: [Blank]	<input type="checkbox"/> Change <input type="checkbox"/> 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 reports 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: *Paul J. Smith* (Signature and typed or printed name of signing officer or director)

DATE: 1-28-02 (Date)

DAYTIME PHONE: (305) 652-6500 (Daytime Phone #)

CR2E037 (9/01)