

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 15, 2000 8:00 am
Secretary of State

02-15-2000 90010 003 ****70.00

DOCUMENT # 704203

1. Entity Name

THE EPISCOPAL CHURCH OF THE HOLY FAMILY, INCORPO

Principal Place of Business

Mailing Address

18501 N.W. 7TH AVE.
 MIAMI FL 33169

18501 N.W. 7TH AVE.
 MIAMI FL 33169-4441

DU001230



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-0936172

Applied For

Not Applicable

Zip

Country

Zip

Country

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

THE VERY, REV. HORACE D WARD
13202 NW 11TH ST.
PEMBROKE PINES FL 33028

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

The Very Rev. Horace D. Ward

2-8-2000

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Delete
 NAME **D HILTON, ELTON E**
 STREET ADDRESS **20705 N. MIAMI AVE.**
 CITY-ST-ZIP **MIAMI FL 33179**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **T CAMPBELL, MAUREEN**
 STREET ADDRESS **21151 NE 2ND AVE.**
 CITY-ST-ZIP **MIAMI FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D JACKSON, WINSTON**
 STREET ADDRESS **100 NE 161 ST.**
 CITY-ST-ZIP **NO MIAMI BCH FL 33162**

TITLE Change Addition
 NAME **Patrick Brown**
 STREET ADDRESS **1935 N.W. 171st Ave.**
 CITY-ST-ZIP **Pembroke Pines, Fl 33028**

TITLE Delete
 NAME **S WHITE, VANDON DR.**
 STREET ADDRESS **70 NW 209 ST.**
 CITY-ST-ZIP **MIAMI FL 33169**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **T THE VERY, REV. HORACE D WARD**
 STREET ADDRESS **13202 NW 11TH ST.**
 CITY-ST-ZIP **PEMBROKE PINES FL 33028**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

The Very Rev. Horace D. Ward

305-652-6797
2-8-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)