

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

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DOCUMENT # 707174

1. Entity Name

South Broward Cradle Nursery, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2203 Douglas St

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Hollywood FL

City & State

Zip

Country

Zip

Country

33020 Broward

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Rev. Albert L. Hannis Jr.

Street Address (P.O. Box Number is Not Acceptable)

2203 Douglas St

City

Hollywood

FL

Zip Code

33020

DO NOT WRITE
IN THIS SPACE

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

Rev. Albert L. Hannis Jr.

Rev. Albert L. Hannis Jr. 12/26/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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
Department of State

10. OFFICERS AND DIRECTORS

TITLE CEO
NAME D
STREET ADDRESS
CITY-ST-ZIP
President
Rev. Albert L. Hannis Jr.
2203 Douglas St
Hollywood FL 33020

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

200009766942
02/07/03--01017--005 **175.00

TITLE V.P.
NAME D
STREET ADDRESS
CITY-ST-ZIP
Richard Robinson
2203 Douglas St
Hollywood FL 33020

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T
NAME T
STREET ADDRESS
CITY-ST-ZIP
Catherine Munnerlyn
2203 Douglas St
Hollywood FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DO NOT WRITE
IN THIS SPACE

TITLE T
NAME T
STREET ADDRESS
CITY-ST-ZIP
Paula Munnerlyn
2203 Douglas St
Hollywood FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Asst Sec
Nyma Watkins
2203 Douglas St
Hollywood FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Financial Sec
Aubrey Council
2203 Douglas St
Hollywood FL

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

SIGNATURE: Rev. Albert L. Hannis Jr. Rev. Albert L. Hannis Jr. 12/26/02 1941923-525

CR2E037B (12/01)

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NOVEMBER 20, 2002

DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FLORIDA 32314

SUBJECT: SOUTH BROWARD CRADLE NURSERY, INC.
REF. NUMBER: 707174

THE BOARD OF DIRECTORS MAILED APPLICATION FOR CORPORATION THE EARLIER PART OF THE YEAR, APPLICATION WAS RETURNED TO US ALONG WITH THE CHECK FOR \$61.25. ALL NEEDED INFORMATION WAS PLACED ON THE APPLICATION AND REMAILED TO YOU ALONG WITH A CHECK IN AUGUST OF 2002. THE BOARD OF DIRECTORS OF SOUTH BROWARD CRADLE NURSERY IS ASKING YOU TO PLEASE WAIVE THE REIN STATEMENT FEE.

IF YOU HAVE ANY QUESTIONS OR CONCERNS PLEASE FEEL FREE TO CONTACT ANY BOARD MEMBER AT (954)923-5371.
THANK YOU IN ADVANCE.

SINCERELY YOURS,

Rev. E.L. Harris

REV. E.L. HARRIS, EXECUTIVE PRESIDENT



FLORIDA DEPARTMENT OF STATE

Ken Detzner
Secretary of State

January 29, 2003

SOUTH BROWARD CRADLE NURSERY, INC.
2203 DOUGLAS STREET
HOLLYWOOD, FL 33020

SUBJECT: SOUTH BROWARD CRADLE NURSERY, INC.
Ref. Number: 707174

We have received your document for SOUTH BROWARD CRADLE NURSERY, INC. and your check(s) totaling \$236.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida nonprofit corporations are required to have at least 3 directors or trustees. Please place the letter "D" or "T" beside the names and business addresses of each director or trustee.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers
Document Specialist

Letter Number: 003A00005868