

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 01, 2001 8:00 am
Secretary of State

03-01-2001 91330 021 ****61.25

DOCUMENT # 707984

1. Entity Name

MT. CALVARY BAPTIST CHURCH, INCORPORATED

Principal Place of Business

Mailing Address

**730 NW 8TH AVENUE
POMPAÑO BEACH FL 33060**

**730 NW 8TH AVENUE
POMPAÑO BEACH FL 33060**

80060100



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

P.O. Box 726

Suite, Apt. #, etc.

City & State

City & State

Pompano Beach, FL 33060

4. FEI Number

65-0070771

Applied For

Not Applicable

Zip

Country

33060

Broward

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

**HARVEY, EUNICE
2181 NW 33RD AVE
LAUDERDALE LAKES FL 33311**

Name **Alfred Thurston**

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

700 NW 18th Street

City **Pompano Beach**

FL

Zip Code **33060**

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 **Alfred Thurston, Treasurer**

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

(NOTE: Registered Agent signature required when reinstating)

2-21-01

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 **P** ☐ Delete
NAME **CAMPBELL, LAURA**
STREET ADDRESS **3820 NW 6TH AVE**
CITY-ST-ZIP **POMPAÑO BEACH FL 33064**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V** ☐ Delete
NAME **THURSTON, PERRY SR**
STREET ADDRESS **2510 NW 4TH ST**
CITY-ST-ZIP **POMPAÑO BEACH FL 33064**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** ☒ Delete
NAME **HARVEY, EUNICE**
STREET ADDRESS **2181 NW 33RD AVE**
CITY-ST-ZIP **LAUDERDALE LAKES FL 33311**

TITLE ☒ Change ☐ Addition
NAME **Thurston, Alfred**
STREET ADDRESS **700 NW 18th Street**
CITY-ST-ZIP **Pompano Beach FL 33060**

TITLE **D** ☐ Delete
NAME **JACKSON, GARLAND**
STREET ADDRESS **5179 NE 18TH TERRACE**
CITY-ST-ZIP **POMPAÑO BEACH FL 33064**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☐ Delete
NAME **HIGGS, DWIGHT**
STREET ADDRESS **705 NE 3RD TERR**
CITY-ST-ZIP **POMPAÑO BEACH FL 33060**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **GRISHAM, FANNIE P**
STREET ADDRESS **407 NW 4TH AVENUE**
CITY-ST-ZIP **POMPAÑO BEACH FL 33060**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)