FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 17, 2002 8:00 am § Secretary of State **DOCUMENT # 708425** 1. Entity Name 04-17-2002 90130 013 ****61.25 HARDING STREET CHURCH OF CHRIST, INC. Principal Place of Business Mailing Address 5828 HARDING STREET 5828 HARDING STREET րթայրումու HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4, FEI Number Applied For 65-0025269 Not Applicable Country Country Zip_ _ \$8.75 Additional 5. Certificate of Status Desired --- ---6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) HORACE Y. MAGUIRE 1821 N. 48TH AVE. HOLLYWOOD FL 33021 Zip Code 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. 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 \Box Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE SD ☐ Delete TITLE ☐ Addition NAME **BLASINGIM, EDWIN** NAME STREET ADDRESS STREET ADDRESS 1160 NW 193 ST CITY-ST-ZIP CITY-ST-ZIP Miami Fl ☐ Delete ☐ Change ☐ Addition TITLE NAME CLAIBORNE, EDGAR STREET ADDRESS STREET ADDRESS 1761 NW 85TH WAY CITY-ST-ZIP CITY-ST-ZIP PEMBROKE PINES FL ☐ Addition TITLE ☐ Delete NAME RICHARDS, GEORGE L. STREET ADDRESS STREET ADDRESS 10671 N.W. 20TH ST. CITY-ST-ZIP CITY-ST-ZIP PEMBROKE PINES FL ☐ Addition TITLE ☐ Delete TITLE NAME NAME WEBB, KENT STREET ADDRESS STREET ADDRESS 910 S.W. 129TH WAY CITY-ST-ZIP CITY-ST-ZIP **DAVIE FL 33325** TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME EVANS, MELVIN STREET ADDRESS STREET ADDRESS 6501 S.W. 5TH ST CITY-ST-ZIP CITY-ST-ZIP PEMBROKE PINES FL TITLE Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS 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 repeiver 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: X

954-961-4112