

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 26, 2001 8:00 am
Secretary of State

06-26-2001 90007 018 ****61.25

A0074933

DO NOT WRITE IN THIS SPACE

DOCUMENT #

709728

1. Entity Name

PARKWAY UNITED METHODIST CHURCH, INC.

Principal Place of Business

Mailing Address

100 NE 44TH STREET
 POMPANO BEACH, FL

33064

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

591312888

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

HANNECART, ETHLYN
 651 SW 15TH ST
 DEERFIELD BEACH, FL 33441

Name
 MARY C. PITTMAN

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

4020 NW 3RD WAY

City
 POMPANO BEACH

FL

Zip Code
 33064

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 MARY C PITTMAN

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

(NOTE: Registered Agent signature required when reinstating)

DATE

6-18-01

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)

☒

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing

Trust Fund Contribution.

☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME PD
 STREET ADDRESS HENNECART, ETHLYN
 CITY-ST-ZIP 651 SW 15TH STREET
 DEERFIELD BEACH, FL 33441 ☐ Delete

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

TITLE
 NAME D
 STREET ADDRESS GILLINGHAM, RUTH
 CITY-ST-ZIP 1640 NW 49TH CT
 POMPANO BEACH, FL 33064 ☐ Delete

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

TITLE
 NAME D
 STREET ADDRESS SCHILKE, DOT
 CITY-ST-ZIP 4280 NE 18TH AVE.
 POMPANO BEACH, FL 33064 ☐ Delete

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

TITLE
 NAME T
 STREET ADDRESS SUTORIUS, RONALD
 CITY-ST-ZIP 117 NE 51ST COURT
 POMPANO BEACH, FL 33064 ☒ Delete

TITLE
 NAME T
 STREET ADDRESS NAOMI RAMOS
 CITY-ST-ZIP 3 NE 45TH COURT
 POMPANO BEACH, FL 33064 ☒ Change ☐ Addition

TITLE
 NAME S
 STREET ADDRESS HENNECART DEBRA
 CITY-ST-ZIP 651 SW 15TH STREET
 DEERFIELD BEACH, FL 33441 ☐ Delete

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

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X ETHLYN HENNECART

954 942-8310

CR2E034 (11/00)