

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 710426

1. Entity Name

FIRST UNITED METHODIST CHURCH OF MIAMI, INC.

Principal Place of Business

400 BISCAYNE BLVD.
MIAMI FL 33132

Mailing Address

400 BISCAYNE BLVD.
MIAMI FL 33132-1913

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 91156 001 ***122.50



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1141042

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VASQUEZ, CARLOS
400 BISCAYNE BLVD
MIAMI FL 33132

7. Name and Address of New Registered Agent

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

Signature, typed name of new 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

TITLE	D	☒ Delete
NAME	MCMILLAN, JAMES	
STREET ADDRESS	400 BISCAYNE BLVD	
CITY-ST-ZIP	MIAMI FL 33132	
TITLE	D	☒ Delete
NAME	BARNES, MARY LOUISE	
STREET ADDRESS	400 BISCAYNE BLVD	
CITY-ST-ZIP	MIAMI FL 33132	
TITLE	D	☐ Delete
NAME	WILSON, DOROTHY	
STREET ADDRESS	400 BISCAYNE BLVD	
CITY-ST-ZIP	MIAMI FL 33132	
TITLE	D	☒ Delete
NAME	ORGAS, RICHARDO	
STREET ADDRESS	400 BISCAYNE BLVD	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	☐ Delete
NAME	VASQUEZ, CARLOS	
STREET ADDRESS	400 BISCAYNE BLVD	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	☒ Delete
NAME	STEELE, DAVID	
STREET ADDRESS	400 BISCAYNE BLVD	
CITY-ST-ZIP	MIAMI FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	☐ Change ☒ Addition
NAME	DEVARONA, ROBERT	
STREET ADDRESS	400 BISCAYNE BLVD	
CITY-ST-ZIP	MIAMI, FL 33132	
TITLE	D	☐ Change ☒ Addition
NAME	SWEARINGEN, VAN	
STREET ADDRESS	400 BISCAYNE BLVD	
CITY-ST-ZIP	MIAMI, FLA-33132	
TITLE	D	☐ Change ☒ Addition
NAME	HUTSON, MIRIAM	
STREET ADDRESS	400 BISCAYNE BLVD	
CITY-ST-ZIP	MIAMI, FL 33132	
TITLE	D	☐ Change ☒ Addition
NAME	CARTER, AUBREY	
STREET ADDRESS	400 BISCAYNE BLVD	
CITY-ST-ZIP	MIAMI, FL 33132	
TITLE	D	☐ Change ☒ Addition
NAME	BRIDGES, EUGENE	
STREET ADDRESS	400 BISCAYNE BLVD	
CITY-ST-ZIP	MIAMI, FL 33132	
TITLE	D	☐ Change ☒ Addition
NAME	GALVIN, OPAL	
STREET ADDRESS	400 BISCAYNE BLVD	
CITY-ST-ZIP	MIAMI, FL 33132	

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 NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)