2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2000 8:00 am
Secretary of State
02-26-2000 90024 037 ****61.25

DOCUMENT # 710859

1. Entity Name

MIRAMAR EVANGELICAL FREE CHURCH, INC.

Principal Place of Business	Mailing Address
6390 S.W. 32ND STREET MIRAMAR FL 33023	6390 S.W. 32ND STREET MIRAMAR FL 33023-5004

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2169792 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

~~P STERGEN, ERIC~~
~~3304 HIBISCUS PLACE~~
~~MIRAMAR FL 33023~~

7. Name and Address of New Registered Agent

Name R. KEVIN CROSS, E.A.

Street Address (P.O. Box Number is Not Acceptable) 1930 TYLER STREET

City Hollywood **FL** Zip Code 33020

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 R. KEVIN CROSS 1/10/2000

Signature, typed or printed name of 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MORGAN, ROBERT 6250 SW 30 ST MIRAMAR FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T CROSS, R. KEVIN E.A. 2039 TYLER STREET HOLLYWOOD FL 33020	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SEEGER, BEN 2974 MYRTLE OAK CIRCLE DAVIE FL 33328	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MIRO, FELIX 2823 WEST ORCHARD CIRCLE DAVIE FL 33328	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C. LUIS GONZALEZ 6751 SW 10TH STREET PEMBROKE PINES, FL. 33023	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	-DEACON BRUCE M. WAREING 721 LAUREL LN. WEST PEMBROKE PINES FL. 33027	☐ Change ☒ Addition

CR2E037 (9/99)

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 [illegible] 2-1-2000 954-981-4677

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #