2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2002 8:00 am
Secretary of State
03-07-2002 90025 050 ****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

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	7. Name and Address of New Registered Agent
CROSS, KEVIN R EA 801 SOUTH FEDERAL HIGHWAY HOLLYWOOD FL 33020	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 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	C DANIELSON, STEVEN R 3812 GRANT STREET HOLLYWOOD FL 33021	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC ANDERSON, WILFORD 7752 HARBOUR BLVD MIRAMAR FL 33023	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE-CHAIRMAN CHRISTOPHER JOHNSON 2330 BERMUDA DRIVE MIRAMAR, FL 33023 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SEEGER, BEN 2974 MYRTLE OAK CIRCLE DAVIE FL 33328	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER ROBERT PEREA 1720 BAYSHORE DRIVE, APT 301 MIAMI, FL 33132 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S SEEGER, DELF 2974 MYRTLE OAK CIRCLE DAVIE FL 33328	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY NORMA BEECH 946 SW 180 TERRACE PEMBROKE PINES, FL 33029 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GONZALEZ, LUIS 6751 SW 10TH STREET PEMBROKE PINES FL 33023	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BLAKE, DAYLE 2819 ALCAZAR DRIVE MIRAMAR FL 33023	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR JAMES PITMAN 1360 W 35th ST. HIALEAH, FL 33012 ☐ Change ☒ Addition

CR2E037 (9/01)

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: Steven R Daniels SIGNATURE REQUIRED Chairman 1/30/02 (954)981-4677
SIGNATURE OF NEW OFFICER OR DIRECTOR, IF CHANGED / TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #