

2001 UNIFORM BUSINESS REPORT (UBR)

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

0003304

DOCUMENT # 712121

1. Entity Name

REFORMATION CHURCH OF GOD, INC.

02-26-2001 90542 020 ****70.00

Principal Place of Business

**705 N.W. 15TH AVE.
 FT. LAUDERDALE FL 33311-7930**

Mailing Address

**705 N.W. 15TH AVE.
 FT. LAUDERDALE FL 33311-7930**

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

65-0053114

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

**WILLIAMS, ELBERT SR
 720 NW 15TH AVE
 P O BOX 5426
 FT LAUDERDALE FL 33311**

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 ☐ Delete
 NAME **PD WILLIAMS, ELBERT SR.**
 STREET ADDRESS **720 NW 15TH AVE**
 CITY-ST-ZIP **FT LAUDERDALE FL 33311**

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

TITLE ☐ Delete
 NAME **VO ARTIS, ANDRE**
 STREET ADDRESS **11315 NW 43 PL**
 CITY-ST-ZIP **CORAL SPRINGS FL**

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

TITLE ☐ Delete
 NAME **SD JACKSON, MATTIE**
 STREET ADDRESS **2821 NW 26TH AVE**
 CITY-ST-ZIP **OAKLAND PARK FL**

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

TITLE ☐ Delete
 NAME **T RICHARDSON, THEODORE**
 STREET ADDRESS **4701 N.W. 20TH STREET**
 CITY-ST-ZIP **LAUDERHILL FL**

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

TITLE ☐ Delete
 NAME **Member Joe W. Williams**
 STREET ADDRESS **160 N.W. 46th Terr**
 CITY-ST-ZIP **Plantation, FL 33317**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 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 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 OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)