

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 712343

1. Entity Name

CENTRAL BAPTIST CHURCH OF MIAMI, FLORIDA, (INCOR

Principal Place of Business

500 NORTHEAST FIRST AVENUE
MIAMI FL 33132

Mailing Address

500 NORTHEAST FIRST AVENUE
MIAMI FL 33132

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-0651075

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CROCKETT, JERRY
4000 SOUTHEAST FINANCIAL CENTER
200 S BISCAYNE BLVD.
MIAMI FL 33131

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 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

TITLE D
NAME WYNN, LARRY ☐ Delete
STREET ADDRESS 600 NE 36TH STREET, PH-19
CITY-ST-ZIP MIAMI FL

TITLE CD
NAME BAXLEY, WILLIS A ☒ Delete
STREET ADDRESS 9755 S.W. 213 TERRACE
CITY-ST-ZIP MIAMI FL

TITLE D
NAME GRyder, CHARLES ☐ Delete
STREET ADDRESS 5660 PINETREE DRIVE
CITY-ST-ZIP MIAMI BCH FL

TITLE VD
NAME CASSELL, BEN ☒ Delete
STREET ADDRESS 1614 N.W. 29 CT.
CITY-ST-ZIP MIAMI FL

TITLE SD
NAME ACTON, DAVID ☒ Delete
STREET ADDRESS 10421 SW 89TH AVENUE
CITY-ST-ZIP MIAMI FL

TITLE CD
NAME ACTON, DAVID ☒ Delete
STREET ADDRESS 10421 SW 89 AVE.
CITY-ST-ZIP MIAMI FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE CD ☒ Change ☐ Addition
NAME Janie Goldberg
STREET ADDRESS 14510 N. Miami Avenue
CITY-ST-ZIP Miami, FL 33168

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

TITLE VD ☒ Change ☐ Addition
NAME Suzanne Acton
STREET ADDRESS 10421 S.W. 89th Avenue
CITY-ST-ZIP Miami, FL 33176

TITLE SD ☒ Change ☐ Addition
NAME Lydia S. Clark
STREET ADDRESS 2333 Brickell Ave. #305
CITY-ST-ZIP Miami, FL 33129

TITLE D ☒ Change ☐ Addition
NAME David Acton
STREET ADDRESS 10421 S.W. 89th Avenue
CITY-ST-ZIP Miami, FL 33176

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

2/4/01 305/349.2361

Date

Daytime Phone #

CR2E037 (10/00)

FILED
Feb 08, 2001 8:00 am
Secretary of State

02-08-2001 90049 040 ****70.00

UUU15461



DO NOT WRITE IN THIS SPACE