

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 25, 2003 8:00 am
Secretary of State

02-25-2003 90140 019 ****70.00

DOCUMENT # 712343

1. Entity Name

CENTRAL BAPTIST CHURCH OF MIAMI, FLORIDA, (INCORPORATED)



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

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

7. Name and Address of New Registered Agent

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

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...I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **CADET, EDLYNE**
STREET ADDRESS **233 NW 49 STREET**
CITY-ST-ZIP **MIAMI FL 33127**

TITLE **D** ☐ Change ☒ Addition
NAME **SUZANNE ACTON**
STREET ADDRESS **10421 SW 89 AVE.**
CITY-ST-ZIP **MIAMI, FL 33176**

TITLE **CD** ☐ Delete
NAME **ANSLEY, JENISU**
STREET ADDRESS **1125 SW 100 CT**
CITY-ST-ZIP **MIAMI FL 33174**

TITLE **D** ☐ Change ☒ Addition
NAME **MARY BARTLEY**
STREET ADDRESS **9503 SW 82 STREET**
CITY-ST-ZIP **MIAMI, FL 33173**

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

TITLE **D** ☐ Change ☒ Addition
NAME **JERRY CROCKETT**
STREET ADDRESS **701 SW 27 ROAD**
CITY-ST-ZIP **MIAMI, FL 33129**

TITLE **VD** ☐ Delete
NAME **CADET, EDNA**
STREET ADDRESS **233 NW 49 STREET**
CITY-ST-ZIP **MIAMI FL 33127**

TITLE **D** ☐ Change ☒ Addition
NAME **RUTH GARCIA**
STREET ADDRESS **6373 JACK RABBIT LANE**
CITY-ST-ZIP **HIALEAH, FL 33014**

TITLE **SD** ☐ Delete
NAME **CLARK, LYDIA S**
STREET ADDRESS **2333 BRICKELL AVE. #305**
CITY-ST-ZIP **MIAMI FL 33129**

TITLE **D** ☐ Change ☒ Addition
NAME **JOE GARCIA**
STREET ADDRESS **6373 JACK RABBIT LANE**
CITY-ST-ZIP **HIALEAH, FL 33014**

TITLE **D** ☐ Delete
NAME **ACTON, DAVID**
STREET ADDRESS **10421 SW 89 AVE.**
CITY-ST-ZIP **MIAMI FL**

TITLE **D** ☐ Change ☒ Addition
NAME **HERBERT MORRIS**
STREET ADDRESS **5987 SW 50 STREET**
CITY-ST-ZIP **MIAMI, FL 33155**

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:

Lydia S Clark
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/19/03 305-858-8995

CR2E037 (10/02)

Attachment

#712343

80040132

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D Addition
NAME	Phillip North
STREET ADDRESS	7721 SW 17 Terrace
CITY - ST - ZIP	Miami, FL 33155
TITLE	D Addition
NAME	Lance Pacetti
STREET ADDRESS	1529 NW North River Drive #23
CITY - ST - ZIP	Miami, FL 33125
TITLE	D Addition
NAME	Cubbedge Phillips
STREET ADDRESS	135 NE 43 Street
CITY - ST - ZIP	Miami, FL 33137
TITLE	D Addition
NAME	Rafael Ramirez
STREET ADDRESS	111 NE 2 nd Avenue #1802
CITY - ST - ZIP	Miami, FL 33132
TITLE	D Addition
NAME	Rosa Whitehead
STREET ADDRESS	6053 SW 63 Terrace
CITY - ST - ZIP	Miami, FL 33143