

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 15, 2001 8:00 am**  
**Secretary of State**

02-15-2001 90054 039 \*\*\*\*70.00

**DOCUMENT # 712906**

1. Entity Name

**MT. NEBO BAPTIST CHURCH, INC.**

Principal Place of Business

Mailing Address

% OTIS, WASHINGTON  
 680 NORTHWEST 33RD AVENUE  
 FT. LAUDERDALE FL 33311

% OTIS, WASHINGTON  
 680 NORTHWEST 33RD AVENUE  
 FT. LAUDERDALE FL 33311

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

**59-2252484**

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

WASHINGTON, OTIS  
 680 NW 33 AVE  
 FT. LAUDERDALE FL

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  
**D**  
**THOMPSON, BOBBY** ☐ Delete  
**2560 NW 15TH COURT**  
**FORT LAUDERDALE FL 33311**

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D** ☐ Change ☐ Addition  
**KEARNEY, THOMAS**  
**2111 NW 28th AVE.**  
**FORT LAUDERDALE, FL 33311**

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**SD** ☐ Delete  
**WASHINGTON, OTIS**  
**680 NW 33RD AVE**  
**FORT LAUDERDALE FL**

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D** ☐ Delete  
**SAMUEL, MORGAN L**  
**4411 NW 34TH STREET**  
**FT LAUDERDALE, FL 00000**

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D** ☐ Delete  
**CUMMINGS, JOHNNY**  
**415 NW 30TH AVE.**  
**FT. LAUDERDALE FL 33311**

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D** ☐ Delete  
**DENSON, ROY**  
**4801 N.W. 39TH ST**  
**LAUDERDALE LAKES FL 33319**

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D** ☐ Delete  
**BENTON, SIG**  
**2137 NW 27 lane**  
**FT. LAUDERDALE FL**

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

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:

*OTIS WASHINGTON*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**1-29-01**

CR2E037 (10/00)

0003203