

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 31, 2001 8:00 am
Secretary of State

07-31-2001 90228 023 ****70.00

DOCUMENT # 714134

1. Entity Name

MIAMI LAKES UNITED METHODIST CHURCH, INCORPORATE

Principal Place of Business

**14800 NW 67 AVE.
 MIAMI LAKES FL 33014**

Mailing Address

**14800 NW 67 AVE.
 MIAMI LAKES FL 33014**

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 **59-1285497**

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

**BLACK, STEVE
 1157 LONGBOAT DRIVE
 COOPER CITY FL 33026**

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, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
 After September 12, 2001, min. will be \$236.25**

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 **SD** ☒ Delete
 NAME **WATTERS, DICK**
 STREET ADDRESS **17927 NW 66 COURT CIRCLE**
 CITY-ST-ZIP **MIAMI FL 33015**

TITLE **PD** ☐ Change ☒ Addition
 NAME **Steve Black**
 STREET ADDRESS **1157 Long Boat Drive**
 CITY-ST-ZIP **Cooper City, FL 33026**

TITLE **VD** ☒ Delete
 NAME **MERRITT, PAUL**
 STREET ADDRESS **14740 HARRIS PLACE**
 CITY-ST-ZIP **MIAMI LAKES FL**

TITLE **VD** ☐ Change ☒ Addition
 NAME **Ken Rehm**
 STREET ADDRESS **7136 LAUREL LANE**
 CITY-ST-ZIP **HAIALEAH, FL 33014**

TITLE **D** ☒ Delete
 NAME **NOBLE, ALICE MARIE**
 STREET ADDRESS **17411 N.W. 62ND CT.**
 CITY-ST-ZIP **HAIALEAH FL**

TITLE **SD** ☐ Change ☒ Addition
 NAME **Jayne Sterner**
 STREET ADDRESS **6720 Brookline Drive**
 CITY-ST-ZIP **MIAMI LAKES, FL 33015**

TITLE **PD** ☒ Delete
 NAME **BARON, JOHN W**
 STREET ADDRESS **6870 MIAMI LAKES DR**
 CITY-ST-ZIP **MIAMI LAKES FL 33014**

TITLE **D** ☐ Change ☒ Addition
 NAME **Bill Clarke**
 STREET ADDRESS **6970 N.W. 186 Street, #110**
 CITY-ST-ZIP **HAIALEAH, FL 33015**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 lines empowered.

SIGNATURE

SIGNATURE

Steve Black

7/22/01

CR2E037 (5/01)