

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715354

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: FAITH UNITED CHURCH OF CHRIST FT. LAUDERDALE, INC.

**Current Principal Place of Business:**

6201 NW 57 ST  
TAMARAC, FL 33319

**New Principal Place of Business:**

**Current Mailing Address:**

6201 NW 57 ST  
TAMARAC, FL 33319

**New Mailing Address:**

FEI Number: 59-6219323      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROMAN, ILEANA REV, DR  
6201 NW 57TH ST.  
TAMARAC, FL 33319      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: COSTELLO, PHIL  
Address: 10590 NW 6 CT  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VPD ( ) Delete  
Name: POPE-URIBE, MICHELLE  
Address: 1882 NW 93 TERR  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: SD ( ) Delete  
Name: HAAS, DOLORES  
Address: 4960 E SABAL PALM BLVD, # 103  
City-St-Zip: TAMARAC, FL 33319

Title: T ( ) Delete  
Name: POWELL, ROY  
Address: 9816 NW 54 PL  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: ATD ( ) Delete  
Name: HERRICK, MYRON  
Address: 8371 N.W. 24TH PLACE  
City-St-Zip: SUNRISE, FL 33322

Title: FSD ( ) Delete  
Name: POWELL, DAPHNE  
Address: 9816 NW 54 PL  
City-St-Zip: CORAL SPRINGS, FL 33076

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: GOLDING, DERRICK  
Address: 11760 NW 9 STREET  
City-St-Zip: PLANTATION, FL 33325

Title: SD (X) Change ( ) Addition  
Name: MESSERSMITH, JOHN  
Address: 9591 NW 43 ST.  
City-St-Zip: SUNRISE, FL 33351

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROY POWELL

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04/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date