

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715354

FILED
Apr 18, 2011
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:

6201 NW 57 ST
TAMARAC, FL 33319 US

Current Mailing Address:

6201 NW 57 ST
TAMARAC, FL 33319

New Mailing Address:

6201 NW 57 ST
TAMARAC, FL 33319 US

FEI Number: 59-6219323

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LIVERMAN, CAROL
11471 NW 35TH PLACE
SUNRISE, FL 33323 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
Name: GOLDING, DERRICK
Address: 11760 NW 9TH STREET
City-St-Zip: PLANTATION, FL 33325 US

Title: VPD
Name: LIVERMAN, CAROL
Address: 11471 NW 35TH PLACE
City-St-Zip: SUNRISE, FL 33323 US

Title: SEC
Name: WILKINSON, ENA
Address: 1900 SW 81 AVE. #205
City-St-Zip: NORTH LAUDERDALE, FL 33068 US

Title: T
Name: OBERLANDER, MARVIN
Address: 7117 NW 71 STREET
City-St-Zip: TAMARAC, FL 33321 US

Title: DC
Name: MERCHANT, LANIS
Address: 5731 BAYBERRY LANE
City-St-Zip: TAMARAC, FL 33321 US

Title: D/C
Name: MERCHANT, RANDOLPH SR
Address: 5731 BAYBERRY LANE
City-St-Zip: TAMARAC, FL 33321 US

I hereby 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 all other like empowered.

SIGNATURE: DERRICK GOLDING

P

04/18/2011

Electronic Signature of Signing Officer or Director

_____ Date