2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 715451 Apr 12, 2000 8:00 am Secretary of State 1. Entity Name ST. JOHN'S CHRISTIAN CHURCH (DISCIPLES OF CHRIST 04-12-2000 90185 019 ****61.25 Principal Place of Business Mailing Address 4213 NOTH FEDERAL HIGHWAY 4213 NOTH FEDERAL HIGHWAY POMPANO BEACH FL 33064 POMPANO BEACH FL 33064-6048 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2382759 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) CORBIN, DONALD K. 727 NE 3RD AVÉ. FT. LAUDERDALE FL 33304 City Zip Code FL 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be \Box Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Delete TITLE Change ☐ Addition FRIEDRICHS, ARTHUR NAME STREET ADDRESS 2510 NE 35TH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LIGHTHOUSE POINT FL TITLE ☐ Delete TITI F ☐ Change ☐ Addition NAME BROOKSHIRE, VORIS G JR NAME STREET ADDRESS STREET ADDRESS 5932 CATESBY STREET CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME **BROOKSHIRE, FLORENCE** NAME STREET ADDRESS STREET ADDRESS 5932 CATESBY ST CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** Delete ☐ Change ☐ Addition TITLE TITLE WOODCOCK, GORDON H NAME NAME STREET ADDRESS STREET ADDRESS 1361 S. OCEAN BLVD CITY-ST-7IP CITY-ST-7IP POMPANO BEACH FL Change Addition TITLE ☐ Delete TITLE FRIEDRICHS, JUANITA NAME NAME STREET ADDRESS STREET ADDRESS 2510 NE 35TH STREET CITY-ST-ZIP CITY-ST-ZIP LIGHTHOUSE POINT FL ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

SIGNATURE AND TYPED OR PRINTED-HIGHE OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered.