

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 722900

1. Entity Name

NORTH DADE COMMUNITY CHURCH, (REFORMED CHURCH IN

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90121 028 ****61.25

Principal Place of Business

Mailing Address

700 N. W. 175TH STREET
MIAMI FL 33169-4708

700 N. W. 175TH STREET
MIAMI FL 33169-4708

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

59-1457487

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SLAGER, WILLIAM T REV.
700 N.W. 175TH STREET
MIAMI FL 33169-4708

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 Rev. William T. Slager

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

(NOTE: Registered Agent signature required when reinstating)

1/10/00

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 ☐ Delete
NAME PD
STREET ADDRESS SLAGER, WILLIAM T REV.
CITY-ST-ZIP 1900 ISLAND DRIVE
MIRAMAR FL 33023

TITLE ☐ Change ☒ Addition
NAME RATIE TURNER
STREET ADDRESS 240 NW 201 AVENUE
CITY-ST-ZIP Pembroke Pines, FL 33029

TITLE ☐ Delete
NAME D
STREET ADDRESS LOPEZ, GEORGE
CITY-ST-ZIP 2401 OLEANDER STREET
MIRAMAR FL 33023

TITLE ☒ Change ☐ Addition
NAME VD
STREET ADDRESS Lopez, George
CITY-ST-ZIP 2401 Oleander Street
Miramar, fl 33023

TITLE ☐ Delete
NAME S
STREET ADDRESS GRAHAM, CLAUDETTE
CITY-ST-ZIP 7050 SW 28 STREET
MIRAMAR FL 33023

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

TITLE ☒ Delete
NAME D
STREET ADDRESS HERNANDEZ, EDWARD
CITY-ST-ZIP 3773 SW 41 ST
HOLLYWOOD FL 33023

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS EPHRIAM, CLARA
CITY-ST-ZIP 1555 NW 116 Street

TITLE ☐ Delete
NAME D
STREET ADDRESS HURST, WAYNE
CITY-ST-ZIP 6302 TWEKSURY TERR
FT LAUDERDALE FL 33331

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

TITLE ☒ Delete
NAME VD
STREET ADDRESS TURNER, J.B.
CITY-ST-ZIP 240 N.W. 201 AVENUE
MIRAMAR FL 33029

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 like empowered.

SIGNATURE: REV. WILLIAM T. SLAGER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

01/10/00 (305)

Daytime Phone 52-5432

CR2E037 (9/99)

X