2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 22, 2001 8:00 am Secretary of State **DOCUMENT # 723425** 1. Entity Name CHRIST EPISCOPAL CHURCH, INC. 03-22-2001 90023 029 ****61 25 Principal Place of Business Mailing Address POP BOX 330006 3481 HIBISCUS ST. DUDHIUM N MIAMI FL 33133 MIAMI FL 33133-5717 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2352066 Not Applicable Zip Country 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) GRIFFITH, BERNARD M 3481 HIBISCUS ST. MIAMI FL 33133-5717 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to **FILE NOW:** 9. Election Campaign Financing **\$5.00** May Be Department of State Trust Fund Contribution. Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. D X Change ☐ Addition TITI F X Delete TITLE DANIELS, WILLIE C. WILDER, ROBERT NAME NAME STREET ADDRESS 10855 SW 142ND LN STREET ADDRESS 14820 Harrison Street <u>Miami, FL 3</u>31<u>7</u>6 CITY-ST-ZIF **MIAMI FL 33176** CITY-ST-ZIP Delete X Change ☐ Addition TITLE TITLE DANIELS, WILLIE C NAME McCOY, CECIL NAME STREET ADDRESS STREET ADDRESS 14820 HARRISON STREET 5840 SW 62nd TERRACE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33176 <u>MIAMI EL 33143-</u> X Change ☐ Addition DS X Delete TITLE TITLE HOPKINS, VIVIAN HOLTON, VERONICA NAME NAME STREET ADDRESS 10740 SW 146 TERRACE STREET ADDRESS 1850 NW 51ST TERRACE CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33176 **MIAMI FL 33142** Change Addition TITLE ☐ Delete BETHEL, WILLIE MAE NAME NAME STREET ADDRESS STREET ADDRESS 10954 SW 152ND TERRACE CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33157** ☐ Addition Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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 attact

CITY-ST-ZIP

CITY-ST-ZIP

File WILLIE MAE BETHEL

03/19/01