2000 UNIFORM BUSINESS REPORT (UBR)

Feb 19, 2000 8:00 am Secretary of State **DOCUMENT # 738359** 02-19-2000 90019 035 ****61.25 CHURCH BY THE SEA (NON-DENOMINATIONAL), INC. Principal Place of Business Mailing Address 2700 MAYAN DR CHURCH BY THE SEA 2455 E. SUNRISE BLVD., PH-E 2455 E. SUNRISE BLVD., PH-E FT LAUDERDALE FL 33316-3240 FT LAUDERDALE FL 33316 US 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-1730183 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) RUF, ALAN FRANCIS 2455 E. SUNRISE BLVD. PH-E City Zip Code FT. LAUDERDALE FL 33304 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: \$5.00 May Be Make Check Payable to 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. 66/6) Change Addition Delete TITLE WOODS, LARRY NAME STREET ADDRESS STREET ADDRESS 12631 N W 1ST PLACE CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL 33325 ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME KIRK, AL STREET ADDRESS STREET ADDRESS 1850 S OCEAN DRIVE, #211 CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33316 ☐ Addition ☐ Change TITLE TITLE ☐ Delete NAME EVANS, WILLIAM R ----NAME STREET ADDRESS STREET ADDRESS 2728 MAYAN DRIVE CITY-ST-ZIP CITY-ST-ZIP <u>Fort Lauderdale Fl</u> ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME RUF. ALAN F STREET ADDRESS STREET ADDRESS 3900 NORTH OCEAN DRIVE #11-K CITY-ST-7IP CITY-ST-ZIP LAUDERDALE BY THE SEA FL 33308 ☐ Addition □ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS 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

AlAN F. Ruf 1-12-00 (954) 566-2130

ike empowered.

changed, or on an attachment with an address with all other

SIGNATURE:

SIGNATUTE

FILED