2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 740003

1. Entity Name

ST. JOHN MISSIONARY BAPTIST CHURCH, INC.

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FILED Jan 30, 2003 8:00 am Secretary of State 01-30-2003 90105 019 ****70.00

					SOO WE THE					
Principal Place of Business 900 NORTH SEACREST BLVD. BOYNTON BEACH FL 33435		900 N	Mailing Address 900 NORTH SEACREST BLVD. BOYNTON BEACH FL 33435			1 40 8 111 (8 8 8 11	iðil Bðila Bðili Bðildð lisi þ	1811 ALDII ALAIT BJAIJ	ANDIN ANGIE INGL	
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			-	☐ CHECK HERE IF MAKING CHANGES			
City & State			City & State			4. FEI Number 6	5-0220124		Applied For]
Zip Country			ip	Cour	ntry	5. Certificate of S	tatus Desired	¢Ω 75 /		
6. Name and Address of Current F			red Agent			7 Name and Add	dress of New Regist	<u>.</u>	1100	1
	5. Name and Address of Galf	Citt register	CO Agent		Name D.		······	-		1
HARRIS, EDWARD M.			REV			VEREND LAN				-
6385 COUNTY FAIR CIRCLE			Street Ad			s (P.O. Box Number is BIRCH ST	REET			ļ
BOYNTO	N BEACH FL 33437									
	$\mathcal{D}_{i}^{(0)}$			-	City			FL Zip C	3426	1
				YNTON BEAC		····		4		
	named entity submits this statemer ions of registered agent.	nt for the pur		-	_	stered agent, or both, in	the State of Florida.	i am tamiliar wi	n, and accept	1
Ū		\mathcal{L}_{a}	ce Cha			•	1-27-03			
SIGNATURE .	Ken Ken	han					1-27-03			1
	Signature, typed or printed name of registered a	gent and title if ap	oplicable. (NOTE	E: Registered	Aperit signature requ	uired when reinstating)		DATE		
								•]
FILE NOW: FEE IS \$61.25			S. Election Campaign Final Trust Fund Contribution			\$5.00 May Be		heck Payabi		
			irust Fund C	ontributio	n. ⊔	Added to Fees	Florida D	epartment o	State	
10.	OFFICERS AND	DIRECTOR		11.		ADDITIONS/CHANG	I SES TO OFFICERS AI	ND DIRECTORS	IN 10	1
TITLE	D		Delete	TITLE	PI			☐ Chang	_37	18
NAME	SIMS, GUARN			NAME	CH	HANEY, LANG	CE	. —	_	(10/02
STREET ADDRESS 209 SW 3RD ST					TADDRESS 2.3	8: BIRCH STEES:			37 /	
CITY-ST-ZIP	BOYNTON BEACH FL 33435			CITY-	ST-ZIP BC	YNTON BCH.	. FL 33426	5		F037
TITLE	TD		☐ Delete	TITLE		ی ویسور	سايد پيخت	☐ Change	e 🗌 Addition	٥
NAME	KING, SEDRICK			NAME		_	-			
STREET ADDRESS CITY-ST-ZIP	1022 NW 6TH AVE			STREET CITY-S	T ADDRESS					
	BOYNTON BEACH FL 33435 D				31-ZIF					1
TITLE NAME	HARRIS, EDWARD M.		☐ Delete	TITLE NAME				Change	e	-
	6385 COUNTY FAIR CIRCLE				T ADDRESS					
CITY-ST-ZIP	BOYNTON BEACH FL 33437			CITY-S						
TITLE	SD		☐ Delete	TITLE				☐ Change	e 🔲 Addition	1
NAME	OWENS, SHIRLEY A			NAME					_	}
STREET ADDRESS	218 NE 12TH AVE			STREET	T ADDRESS					
CITY-ST-ZIP	BOYNTON BEACH FL 33435			CITY-S	ST-ZIP					
TITLE				TITLE				Change	e 🔲 Addition	1
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NAME			∟ Delete	NAME						
NAME STREET ADDRESS			∟f Delete	NAME STREET	T ADDRESS					
NAME STREET ADDRESS CHY-ST-ZIP				NAME STREET CITY-S	-					
NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	NAME STREET CITY-S	-			Change	Addition	
NAME STREET ADDRESS CHY-ST-ZIP				NAME STREET CITY-S TITLE NAME	-			☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME				NAME STREET CITY-S TITLE NAME	ST-ZIP T ADDRESS			Change	: Addition	

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 647, 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:

561 732-2377