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

0031962

DOCUMENT # 740232

FILED

03 NOV 19 PM 2:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name

CHURCH OF THE INTERCESSION

REINSTATEMENT 03

☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business	Mailing Address
501 NORTHWEST 17TH STREET FORT LAUDERDALE FL 33311	501 NORTHWEST 17TH STREET FORT LAUDERDALE FL 33311

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 59-1458859 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PARAISON, MAUD REV. 1301 N.E 114TH TERR. MIAMI FL 33161	Name Maud Paraison Street Address (P.O. Box Number is Not Acceptable) 3480 N.W. 35 Street City LAUDERDALE LAKES FL Zip Code 33309

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE MAUD PARAISON Maud Paraison DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees	Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T DALLEMAND, PASCALIE 1501 S.W. 72ND AVE. PLANTATION FL 33317	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 400024388814 11/03/03--01102--008 **70.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GREEN, ROWENA 6500 NW 26 ST SUNRISE FL 33313	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 400024388814 11/19/03--01065--015 **166.25
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WILLIAMS, ERNEST 3301 NW 15TH PL FORT LAUDERDALE FL 33311	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JOSEPH, RONALD 25 PLEASANT HILL LANE TAMARAC FL 33319	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LEROY, MELISSA 4821 N.W. 7TH DRIVE PLANTATION FL 33317	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PARAISON, MAUD REV. 1301 N.E 114TH TERR. MIAMI FL 33161	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

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: MAUD PARAISON REV. Rev. Maud Paraison 10/20/03 (954) 763-5986

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #