

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2006 08:00 AM
Secretary of State

DOCUMENT # 745137	
1. Entity Name UNITED CHURCH OF GOD-FLORIDA DISTRICT, INC.	

Principal Place of Business 1151 NW 27TH AVE FT LAUDERDALE, FL 33311	Mailing Address 1151 NW 27TH AVE FT LAUDERDALE, FL 33311
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01232006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BASS, PHILLIP 7840 ORLEAN STREET MIRAMAR, FL 33023	DO NOT WRITE IN THIS SPACE
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE _____
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Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MOSLEY, DOROTHY 1043 NW 13TH ST FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM STOKES, CLYDE JR 8240 NW 52ND ST LAUDERHILL, FL 33351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PONDER, RALPH 3190 NW 4 PL FT LAUDERDALE, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD STEELE, LENZY 1300 NW 1ST STREET DANIA, FL 33020
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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02/02/06-80072-007 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u><i>Dorothy A. Mosley</i></u> Dorothy A. Mosley 1-23-06 954 632-121	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #