

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

FILED
Feb 06, 2003 8:00 am
Secretary of State

02-06-2003 90121 027 ****70.00

DOCUMENT # 748909

1. Entity Name
YOUTH CRUSADE FOR CHRIST DELIVERANCE CHURCH, INC.



Principal Place of Business

**1227 NW 29TH ST
MIAMI FL 33142**

Mailing Address

**P.O. BOX 472615
MIAMI FL 33247**

20024324



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-1619942**

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**WASHINGTON, LARRY
11802 SW 273RD ST
NARANJA FL 33032**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

TITLE **PD** ☐ Delete
NAME **WASHINGTON, LARRY**
STREET ADDRESS **11802 SW 273RD ST**
CITY-ST-ZIP **HOMESTEAD FL 33032**

TITLE **VP** ☐ Delete
NAME **WASHINGTON, CAROLYN**
STREET ADDRESS **11802 SW 273RD ST**
CITY-ST-ZIP **HOMESTEAD FL 33032**

TITLE **SD** ☐ Delete
NAME **SANDERS, DENISE A**
STREET ADDRESS **2935 NW 87 TERRACE**
CITY-ST-ZIP **MIAMI FL 33157**

TITLE **D** ☐ Delete
NAME **JONES, DAVID**
STREET ADDRESS **651 NW 58TH ST APT 207**
CITY-ST-ZIP **MIAMI FL 33127**

TITLE **SD** ☐ Delete
NAME **SANDERS, DENISE A**
STREET ADDRESS **2935 NW 87TH TERR**
CITY-ST-ZIP **MIAMI FL 33147**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] **2/3/03**

CR2E037 (10/02)