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

FILED
Jun 19, 2003 8:00 am
Secretary of State

05-05-2003 91773 035 ****70.00

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[redacted]

DOCUMENT # N00000002283

1. Entity Name
MIRACLES WITHIN DIMENSIONS INTERNATIONAL CHURCH ASSOCIATION, INC.

Principal Place of Business	Mailing Address
39340 US 19 NORTH TARPON SPRINGS FL 34689	P.O. BOX 312 TARPON SPRINGS FL 34689

☑ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
39340 US 19 North	P.O. Box 312
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tarpon Springs, Fl.	City & State: Tarpon Springs, Fl.
Zip: 34689 Country: North America	Zip: 34689 Country: North America

4. FEI Number 59-3641257 — 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
MCKAY, GEORGE III 1013 BRASS LANE HOLIDAY FL 34691	Name: George McKay III Street Address (P.O. Box Number is Not Acceptable): 9407 Hilldrop Ct. City: Tampa, Florida FL Zip Code: 33615

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: George McKay III — 5/1/03
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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD ☐ Delete	TITLE	President PD ☐ Change ☐ Addition
NAME	MCKAY, GEORGE III	NAME	George McKay III
STREET ADDRESS	1013 BRASS LANE	STREET ADDRESS	9407 Hilldrop Ct.
CITY-ST-ZIP	HOLIDAY FL 34691	CITY-ST-ZIP	Tampa, Fl. 33615
TITLE	VD ☐ Delete	TITLE	Vice-President VD ☐ Change ☐ Addition
NAME	MCKAY, REBECCA DR.	NAME	Rebecca A. McKay
STREET ADDRESS	1013 BRASS LANE	STREET ADDRESS	9407 Hilldrop Ct.
CITY-ST-ZIP	HOLIDAY FL 34691	CITY-ST-ZIP	Tampa, Florida 33615
TITLE	T ☑ Delete	TITLE	Treasurer TD ☐ Change ☑ Addition
NAME	SLAUGHTER, LATWONDA	NAME	George Higgins III
STREET ADDRESS	1909 ELLIOT DR	STREET ADDRESS	9407 Hilldrop Ct.
CITY-ST-ZIP	CLEARWATER FL 33763	CITY-ST-ZIP	Tampa, Florida 33615
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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: SIGNATURE REQUIRED — 5/1/03 — (813) 249-7952
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #