

FILED
Jul 04, 2002 8:00 am
Secretary of State

05-22-2002 90097 031 ***70.00

2002 UNIFORM BUSINESS REPORT (1-3)**DOCUMENT # NQ0000003170**

1. Entity Name

NEW SALEM FELLOWSHIP MISSIONARY BAPTIST CHURCH/S
H.A.D.E. OUTREACH CRUSADE MINISTRIES INC.

Principal Place of Business Mailing Address
 2810 FORDHAM RD. PO BOX 61827
 PALM BAY FL 32905 PALM BAY FL 32906-1927



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
 46905 AVE 48 LIPSCOMB ST P.O. BOX 61927
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 Palm Bay, FL 32905 Palm Bay, FL
 Zip Country Zip Country
 32905 BSA 32906-1927 USA

4. FEI Number 59-3645684 Applied For
 Not Applicable

5. Certificate of Status Desired ☒ \$9.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

BERRY, LAWRENCE C REV
 5812 PINWOOD DRIVE NORTH EAST
 PALM BAY FL 32906-1921

Berry, Lawrence C
 1245 APT G-104 Palm
 Bay Road
 Palm Bay, FL 32905

7. Name and Address of New Registered Agent

~~Parish Chalmers Clayton Beng~~
 Address (P.O. Box Number is Not Acceptable)
 P.O. BOX 61927
 City Palm Bay FL Zip Code 32906-1927

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.

SIGNATURE REV. Lawrence Clayton Beng Address only changed
 Signature, typed or printed name of registered agent and date applicable. (NOTE: Registered Agent signature required when re-appointing)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

TITLE PCD
 NAME BERRY, LAWRENCE C
 STREET ADDRESS 5812 PINWOOD DRIVE NORTH EAST
 CITY-ST-ZIP PALM BAY FL 32905 ☐ Delete

TITLE VIT
 NAME BERRY, ALSEA ROSITTA
 STREET ADDRESS 5812 PINWOOD DRIVE NORTH EAST
 CITY-ST-ZIP PALM BAY FL 32905 ☐ Delete

TITLE ST
 NAME WORTHINGTON, SHARON
 STREET ADDRESS 975 BURN
 CITY-ST-ZIP PALM BAY FL 32905 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PCD
 NAME Berry, Lawrence C
 STREET ADDRESS 1245 APT G-104 Palm Bay Road
 CITY-ST-ZIP Palm Bay, FL 32905 ☐ Change ☐ Addition

TITLE VIT
 NAME BERRY, ALSEA ROSITTA
 STREET ADDRESS 1245 APT G-104 Palm Bay, FL 32905 ☐ Change ☐ Addition

TITLE ST
 NAME Dwight Schofield-Mayor
 STREET ADDRESS 260 East University Blvd. Apt C
 CITY-ST-ZIP Melbourne FL 32901 ☐ Change ☐ Addition

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

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

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

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 817, 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: Lawrence C. Berry
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/02
 Date

Daytime Phone #

CR25037 (9/01)