

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

FILED

DOCUMENT # N00000004213

1. Entity Name

THE GATE OF BETHEL, INC.

03 JAN -2 AM 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

100009422671
12/09/02--01086--005 **70.00

2. Principal Place of Business

11 NW 34th Ave

3. Mailing Address

P.O. Box 120184

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Ft. Lauderdale, FL

City & State

Ft. Lauderdale, FL

4. FEI Number

05-1038222

Applied For

Not Applicable

Zip 33311

Country Broward

Zip 33312

Country Broward

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Ivory Wilson

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

3571 NW 2nd Street

City

Ft. Lauderdale

FL

Zip Code 33311

**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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$61.25

Initial or Amended UBR

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 NAME STREET ADDRESS CITY-ST-ZIP	PD. WILSON, IVORY 11 NW 34th AVE FT LAUDERDALE FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WILSON, SANDRA 11 NW 34th AVE, FT LAUD FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Blissett Hyacinth 1222 9th St Lane North Royal Palm Beach, FL 33412
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

12/22/02

954-316-4679

CR2E037B (12/01)



The Gate of Bethel

11 NW 34th Avenue, Fort Lauderdale, Fl 33311

Office (954) 316-4679 Fax (954) 316-8170

Bishop Dr. Ivory L. Wilson, President/Founder

To Whom Concern:

We did not receive our UBR form at the beginning of the year and the person we call who mailed us this form, they said we should have received it at the beginning of the year 2002, but we did not.

We are sending the \$ 70.00 for the incorporation and the certificate of status.

Thank You,

Mrs. Sandra Wilson, Secretary