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

DOCUMENT # N0000004473

NEW ASSEMBLY OF GALILEE BAPTIST CHURCH, INC.

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FILED May 05, 2003 8:00 am § Secretary of State

05-05-2003 90118 010 ****61.25

				ł	A CONTRACTOR	` }				
1238 N.E. 6TH AVE. 12			Mailing Address 1238 N.E. 6TH AVE. FT, LAUDERDALE FL 3	3304				Adio and Bigis Sch		
2. Principal P	lace of Busin	ess	3. Mailing Address							
Suite, Apt.	#, etc.	<u> </u>	Suite, Apt. #, etc.	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State			City & State	City & State			Number 65-1030664 Applied For]
Zip	p Country Zip			p Country			atus Desired [\$8.75 A		1
6. Name and Address of Current Regis			Registered Agent			7. Name and Add	rese of New Regis	·		-{
	o. Hattie	and Address of Correlati	registered Agent		Name	1. Nume and Add	icas of item flogis	toras Agont		7
MARCELUS, JAQUES 2520 NW 42ND AVE.					Street Addres	s (P.O. Box Number is N	lot Acceptable)			-
LAUDERI	HILL FL 333						·]
·, ·					City			FL Zip C		
	named entity ions of regist	submits this statement for ered agent	the purpose of changing	j its registere	d office or regis	tered agent, or both, in	the State of Florida.	. I am familiar wi	h, and accept	
	مین. مین	_	1 - On							Ì
SIGNATURE .	Signature, typed	or printed name of registered agent a	El Cellus o (Industrial industrial industria	NOTE: Registered	Agent signature requ	ired when reinstating)		#-/i	1-23	
										┨
i	FILE NOW	FEE IS \$61.25		Campaign Fi Id Contribution		\$5.00 May Be Added to Fees		Check Payab Department o		
10,		OFFICERS AND DIR	ECTORS	11.		ADDITIONS/CHANGI	ES TO OFFICERS A	ND DIRECTORS	IN 10	+
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NAME		JS, JACQUES		NAME						100
STREET ADDRESS CITY-ST-ZIP	2520 NW			•	T ADDRESS ST-ZIP					E037 (10/02
	STD	LL FL 33313			S1-ZIP				a [T] Addition	マ へ
TITLE NAME		JS, MIMOSE	☐ Delete	TITLE NAME				Chang	e 🔲 Addition	70
STREET ADDRESS	2520 NW				T ADDRESS					}
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NAME	TULLIEN,			NAME	J					
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NAME		RNADETTE E	□ Delete	NAME				onung	2 CI vidention	
STREET ADDRESS	2840 SUM	ERSET DR. APT M308		STREE	T ADDRESS					-
CITY-ST-ZIP	LAUDERD/	ALE LAKES FL 33311		CITY-	ST-ZIP					↓
TITLE			☐ Delete	TITLE				☐ Chang	e Addition	
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CITY-ST-ZIP					ST-ZIP					-
TITLE	-		Delete	TITLE			_	Chang	e Addition	7
NAME	1			NAME						
STREET ADDRESS				STREE	T ADDRESS					1
CITY-ST-ZIP				OID4	ST-ZIP					- 1

12. Thereby certify that the information supplied with this filling 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.

SIGNATURES

4-10-03