

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State

05-29-2002 90708 017 ****61.25

DOCUMENT # N00000007188

1. Entity Name

DYING TO LIVE IN CHRIST MINISTRIES, INC.

Principal Place of Business

Mailing Address

8450 SHERMAN CIR N BLDG E APT 108
 MIRAMAR FL 33025

8450 SHERMAN CIR N BLDG E APT 108
 MIRAMAR FL 33025

2. Principal Place of Business

3870 NW 67th Way
 Suite, Apt. #, etc.

3. Mailing Address

PO Box 190114
 Suite, Apt. #, etc.

City & State

Lauderhill, Florida

City & State

FL, Lauderhill

Zip

33319

Country

USA

Zip

33319

Country

USA

4. FEI Number

65-1078994

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

DEWBERRY, DONNA ESQ.
 8450 SHERMAN CIR N BLDG E APT 108
 MIRAMAR FL 33025

7. Name and Address of New Registered Agent

Name: DONNA DEWBERRY
 Street Address (P.O. Box Number is Not Acceptable): 3870 NW 67th Way
 City: Lauderhill FL Zip Code: 33319

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

Donna Dewberry - Donna Dewberry Esquire - Secretary

05-13-02

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
 Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME	DP DEWBERRY, WILLIAM H JR	<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	8450 SHERMAN CIR N BLDG E APT 108 MIRAMAR FL 33025	
TITLE NAME	DS DEWBERRY, DONNA T	<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	8450 SHERMAN CIR N BLDG E APT 108 MIRAMAR FL 33025	
TITLE NAME	DT SURRANCY, RACHELLE T	<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	17401 SW 140TH CT MIAMI FL 33177	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	DP Dewberry, William H, Jr.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	3870 NW 67th Way Lauderhill, FL 33319	
TITLE NAME	DS Dewberry, Donna T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	3870 NW 67th Way Lauderhill, FL 33319	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:

Donna Dewberry (Donna T. Dewberry) Secretary

05-13-02

(954) 848-6308

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)