

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000007244

1. Entity Name

NORTHWEST DADE CHURCH OF CHRIST, INC.

FILED

Feb 19, 2002 8:00 am  
Secretary of State

02-19-2002 90116 031 \*\*\*\*70.00

Principal Place of Business

Mailing Address

2740 N.W. 175TH ST.  
MIAMI FL 33056

2740 N.W. 175TH ST.  
MIAMI FL 33056

2. Principal Place of Business

3990 N.W. 167TH STREET

3. Mailing Address

3990 N.W. 167TH ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

Zip

33056

Country

DADE

Zip

33056

Country

DADE

4. FEI Number

65-1045487

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CARTER, JAMES  
321 N. 72ND TERR.  
HOLLYWOOD FL 33024

Name

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

City

FL

Zip Code

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME HOLDEN, ALONZA  
STREET ADDRESS 2740 N.W. 175TH ST.  
CITY-ST-ZIP MIAMI FL 33056 ☐ Delete

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

TITLE VD  
NAME WILLIAMS, EDDIE  
STREET ADDRESS 2740 N.W. 175TH ST.  
CITY-ST-ZIP MIAMI FL 33056 ☐ Delete

TITLE VICE PRESIDENT  
NAME WILLIAMS, EDDIE  
STREET ADDRESS 18808 N.W. 58ND COURT  
CITY-ST-ZIP OPA LOCKA, FLORIDA 33055 ☒ Change ☐ Addition

TITLE SD  
NAME CARTER, JAMES  
STREET ADDRESS 2740 N.W. 175TH ST.  
CITY-ST-ZIP MIAMI FL 33056 ☐ Delete

TITLE SECRETARY  
NAME CARTER, JAMES S.  
STREET ADDRESS 321 NORTH 72ND TERRACE  
CITY-ST-ZIP HOLLYWOOD, FLORIDA 33024 ☒ Change ☐ Addition

TITLE TD  
NAME PHILLIPS, KEVIN  
STREET ADDRESS 2740 N.W. 175TH ST.  
CITY-ST-ZIP MIAMI FL 33056 ☐ Delete

TITLE TREASURER  
NAME PHILLIPS, KEVIN  
STREET ADDRESS 709 N.W. 47TH STREET  
CITY-ST-ZIP POMPAHO BEACH, FLORIDA 33064 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/22/2002 (954) 961-9243

CR2E037 (9/01)