2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N00000007783 1. Entity Name 04-24-2001 90324 037 \*\*\*\*65.00 FIRST UNITED CHURCH OF JESUS CHRIST (APOSTOLIC) Principal Place of Business Mailing Address 1617 N.W 38TH AVE C/O ELDER SHIRLEY ROBERTSON FT LAUDERDALE FL 33311 7330 NW 52ND CT LAUDERHILL FL 33319 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State Applied For Not Applicable Country ΖIp Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent ROBERTSON, SHIRLEY 7330 NW 52 CT LAUDERHILL FL 33319 red agent, or both, in the state of Florida. 8. The above named entity submits this statement for the purpose of changing its registered SIGNATURE FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State ADDITIONS (CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS Change TITLE Delata TITLE ☐ Addition NAME MALEF SCOTT, BISHOP I STREET ADDRESS STREET ADDRESS 4331 GARY RIDGE DR CETY-ST-ZIP CITY-ST-ZIP RANDALLSTOWN MD 21133 Addition ☐ Detate TITLE Change MAME NAME WATKINS, NORMA STREET ADDRESS STREET AUDRESS 4701 NW 42ND ST CITY-SF-ZP LAUDERDALE LAKES FL 33319 CITY-ST-ZIP TITLE ☐ Deleta TITLE NULF BENNETT, MELVINA MALE STREET ADDRESS STREET ADDRESS 4235 NW 52ND AVE *33*319 Q17-51-7P CITY-\$1-2# LAUDERDALE LAKES FL 33319 Delete Change ☐ Addition tin F TITLE NAME ROBERTSON, SHIRLEY NAME STREET ADORESS STREET ADDRESS 7330 NW 52ND CT CITY-ST-ZIP CITY-ST-7/P LAUDERHILL FL 33319 Delete MLE TITLE Change Addition NAME BECKLES, SINCLAIR HUNE STREET ADDRESS STREET ADDRESS 9351 NW 33RD MANOR CITY-ST-ZIP CITY-ST-ZIP SUNRISE FL 33351 TIDE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS 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 eath; 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

SIGNATURE:

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## FILED Jun 18, 2001 8:00 am Secretary of State