

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 28, 2002 8:00 am
Secretary of State

01-28-2002 90007 031 *****70.00

DOCUMENT # NO1000006098

1. Entity Name

UNITED CHRISTIAN FELLOWSHIP MINISTRIES, INC.

Principal Place of Business

620 SW 8TH COURT
DELRAY BEACH, FL 33444

Mailing Address

C/O FRANK MCCASKILL SR.
3001 NW 24 ST.
FT. LAUDERDALE, FL 33311

2. Principal Place of Business

620 S.W. 8th Ct.

3. Mailing Address

3001 N.W. 24 St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Delray Beach, FL 33444

City & State

Highway 24, Ft. Lauderdale, FL

Zip

33444

Country

P.R.

Zip

33311

Country

Broward

4. FEI Number

651152397

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NELSON, EULA
1420 NW 20TH COURT, #A
FT. LAUDERDALE, FL 33311

7. Name and Address of New Registered Agent

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

TITLE DP
NAME MCCASKILL, FRANK SR.
STREET ADDRESS 3001 NW 24 STREET
CITY-ST-ZIP FT. LAUDERDALE, FL 33311 ☐ Delete

TITLE DT
NAME DAVIS, MARAVALYN
STREET ADDRESS 812 SW 24 AVE.
CITY-ST-ZIP FT. LAUDERDALE, FL 33312 ☐ Delete

TITLE D
NAME CANTRELLE, JOE
STREET ADDRESS 461 E. EVANSTON CIRCLE
CITY-ST-ZIP FT. LAUDERDALE, FL 33312 ☐ Delete

TITLE D
NAME AUSTIN, EDGAR N
STREET ADDRESS 1256 W. 27 ST.
CITY-ST-ZIP RIVERA BEACH, FL 33404 ☐ Delete

TITLE S
NAME WHEELER, ALMA
STREET ADDRESS 1519 NW 14 ST
CITY-ST-ZIP FT. LAUDERDALE, FL 33311 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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CITY-ST-ZIP ☐ Change ☐ Addition

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:

Frank McCaskill Sr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/02

954-7336649

Date

Daytime Phone #

0022268

CR2E037 (9/01)