

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90364 033 ****66.25

DOCUMENT # N01000006906

1. Entity Name

HOLY GHOST FAITH TEMPLE, INC.

Principal Place of Business

Mailing Address

**11700 W GOLF DRIVE
 MIAMI FL 33167**

**11700 W GOLF DRIVE
 MIAMI FL 33167**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JAMES, WILLIE DEAN

**11700 W GOLF DRIVE
 MIAMI FL 33167**

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	D/PK	☐ Delete
NAME	JAMES, WILLIE DEAN	
STREET ADDRESS	11700 W GOLF DR	
CITY-ST-ZIP	MIAMI FL 33167	
TITLE	D/T/S	☐ Delete
NAME	ROSS, RACHEL	
STREET ADDRESS	759 NW 101 ST	
CITY-ST-ZIP	MIAMI FL 33150	
TITLE	D	☒ Delete
NAME	WHITE, WILLIAM	
STREET ADDRESS	17600 NW 5 AVE	
CITY-ST-ZIP	MIAMI FL 33169	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	☐ Change ☒ Addition
NAME	Dorothy Palmer	
STREET ADDRESS	761 N.W. 101 Street	
CITY-ST-ZIP	MIAMI, FL 33150	
TITLE	D.	☐ Change ☒ Addition
NAME	Christine Hayes	
STREET ADDRESS	2028 N.W. 3rd Ave.	
CITY-ST-ZIP	MIAMI, FL 33127	
TITLE	V/M	☐ Change ☒ Addition
NAME	PATRICIA BETTON	
STREET ADDRESS	1338 NW 59 ST	
CITY-ST-ZIP	MIAMI, FL 33142	
TITLE		☐ Change ☐ Addition
NAME		
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 another like empowered.

SIGNATURE:

WILLIE DEAN JAMES
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

305-687-6190

CR2E037 (9/01)