

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 30, 2006 8:00 am
Secretary of State

03-30-2006 90029 022 ****61.25

DOCUMENT # **NO1000007792**

1. Entity Name

**FAMILIES R US COMMUNITY BAPTIST MINISTRIES,
INC.**



Principal Place of Business

**14500 S.W. 280TH STREET
LOT 140
HOMESTEAD FL 33032**

Mailing Address

**14500 S.W. 280TH STREET
LOT 140
HOMESTEAD FL 33032**

2. Principal Place of Business

20121 SW 112 Place

3. Mailing Address

20121 SW 112 Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami Florida

City & State

Miami Florida

Zip

33189

Country

U.S.A

Zip

33189

Country

USA

4. FEI Number

03-0379363

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

1st MOORE

CR2E037 (10/05)



6. Name and Address of Current Registered Agent

**SULLIVAN, CHARLES A
20121 SW 112 PLACE
MIAMI FL 33189**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-stating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **SULLIVAN, CHARLES A**
STREET ADDRESS **20121 S.W. 112TH PLACE**
CITY-ST-ZIP **MIAMI FL 33189**

TITLE **VD** ☐ Delete
NAME **SULLIVAN, THERESA E**
STREET ADDRESS **20121 S.W. 112TH PLACE**
CITY-ST-ZIP **MIAMI FL 33189**

TITLE **SD** ☐ Delete
NAME **FRITH, PAULETTE**
STREET ADDRESS **11980 S.W. 184TH STREET**
CITY-ST-ZIP **MIAMI FL 33172**

TITLE **TD** ☐ Delete
NAME **CLEVELAND, ARLENE**
STREET ADDRESS **12025 S.W. 186TH STREET**
CITY-ST-ZIP **MIAMI FL 33172**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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 exemptions contained in Section 119, 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: **CHARLES A. Sullivan**

3-22-06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Desktop: Printer R