

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 30, 2002 8:00 am**  
**Secretary of State**

04-30-2002 90180 006 \*\*\*\*61.25

B0079145



DO NOT WRITE IN THIS SPACE

**DOCUMENT # N01841**

1. Entity Name

**BIBLEWAY BAPTIST CHURCH, INC.**

Principal Place of Business

Mailing Address

2961 N.W. 7TH STREET  
 FT LAUDERDALE FL 33311

504 S.W. 2ND STREET, APT 2  
 POMPAÑO BEACH FL 33060

2. Principal Place of Business

3. Mailing Address

FT LAUDERDALE  
 Suite, Apt. #, etc.

2961 N.W. 7TH ST  
 Suite, Apt. #, etc.

City & State

City & State

FT LAUDERDALE FL

FL

Zip

Country

Zip

Country

333117601

BROWARD

333117601

BROWARD

4. FEI Number

59-2414294

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

DECOURSEY, JOEL REV  
 504 SW 2ND STREET  
 APT #2  
 POMPAÑO BEACH FL 33060

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 DECOURSEY, JOEL REV  
 STREET ADDRESS 504 S.W. 2ND STREET., APT 2  
 CITY-ST-ZIP POMPAÑO BEACH FL 33060 ☐ Delete

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

TITLE SD  
 NAME STOKES, ROBERTA  
 STREET ADDRESS 3621 N.W. 4TH STREET  
 CITY-ST-ZIP FORT LAUDERDALE FL 33311 ☐ Delete

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

TITLE D  
 NAME STOKES, LORAIN B  
 STREET ADDRESS 204 N.W. 27TH TERRACE  
 CITY-ST-ZIP FORT LAUDERDALE FL 33311 ☐ Delete

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

TITLE CD  
 NAME PRYER, MARY  
 STREET ADDRESS 604 S.W. 28TH STREET  
 CITY-ST-ZIP FORT LAUDERDALE FL 33311 ☐ Delete

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

TITLE D  
 NAME PRYER, ALFRED  
 STREET ADDRESS 604 S.W. 28TH STREET  
 CITY-ST-ZIP FORT LAUDERDALE FL 33311 ☐ Delete

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 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 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:

*RSIGNATURE REQUIRED*

4-16-02

Date

Daytime Phone #

CR2E037 (9/01)