

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0010285

DOCUMENT # N02000000950

1. Entity Name

CRAWFORD CHRISTIAN CENTER, INC.



FILED

03 JUL 14 AM 8:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business

8201 N.W. 45TH STREET  
LAUDERHILL FL 33351  
US

Mailing Address

8201 N.W. 45TH STREET  
LAUDERHILL FL 33351  
US

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

01-0591016

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CRAWFORD, SIDNEY JR.  
8201 N.W. 45TH STREET  
LAUDERHILL FL 33351

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

*Sidney Crawford Jr.*

(NOTE: Registered Agent signature required when reinstating)

DATE

7-7-03

FILE NOW: FEE IS \$61.25  
After September 10, 2003, min will be \$236.25

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 P ☐ Delete  
NAME CRAWFORD, SIDNEY JR.  
STREET ADDRESS 8201 N.W. 45TH STREET  
CITY-ST-ZIP LAUDERHILL FL 33351

TITLE V ☐ Delete  
NAME MILLNER, MICHAEL  
STREET ADDRESS 422 N.W. 10TH STREET  
CITY-ST-ZIP POMPANO BEACH FL 33069

TITLE S ☐ Delete  
NAME MILLNER, PATRICIA  
STREET ADDRESS 422 N.W. 10TH STREET  
CITY-ST-ZIP POMPANO BEACH FL 33069

TITLE S ☒ Delete  
NAME DIXON, VONDA  
STREET ADDRESS 1566 N.W. 7TH LANE  
CITY-ST-ZIP POMPANO BEACH FL 33069

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 Treasurer ☐ Change ☒ Addition  
NAME Frances Marilyn Crawford  
STREET ADDRESS 8201 N.W. 45TH STREET  
CITY-ST-ZIP LAUDERHILL, FL 33351

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
300021588113  
07/16/03--01024--017 \*\*70.00

TITLE ☐ Change ☐ Addition  
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 ☐ 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:

*Sidney Crawford Jr.*

7-7-03

954-746-9431

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (4/03)