


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2006 08:00 AM
Secretary of State

DOCUMENT # N02000001871	
1. Entity Name TRUE HOLINESS EVANGELIST FAITH CENTER UNITED CHRISTIAN FELLOWSHIP COMMUNITY MINISTRIES INC.	

Principal Place of Business 2310 NW 58TH STREET MIAMI, FL 33142	Mailing Address 2310 NW 58TH STREET MIAMI, FL 33142
---	---



01172006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 01-0642706	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent WATSON, JOSEPH E 2310 NW 58TH STREET MIAMI, FL 33142
--

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BRAITHWAITE, WILLIE-BELL 7770 NORTHWEST 7TH AVENUE MIAMI, FL 33050
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD BARCLAY, GENEVE 7770 NORTHWEST 7TH AVENUE MIAMI, FL 33050
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD WOODEN, PATRICIA 7770 NORTHWEST 7TH AVENUE MIAMI, FL 33050
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD BRAITHWAITE, TAMIKA 7770 NORTHWEST 7TH AVENUE MIAMI, FL 33050
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

000000453065
03/14/06-80005-007 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: Joseph E. Watson 01/29/06 305-665-8929
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #