FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

MEDINA, ROSA

5925 GULF DR.

4407 ROYAL DAK LANE

NEW PORT RICHEY FL

FIZER, WILSON FORD

NEW PORT RICHEY FL

TITLE

NAME

TITLE

NAME

DOCUMENT #
1. Corporation Name

N03310

(2)

UNITED CHRISTIAN ASSEMBLIES, INC.

Principal Place of Business 5531 GULF DR NEW PORT RICHEY FL 34652		Mailing Address 5531 GULF DR NEW PORT RICHEY FL 34852-4021							
						3. Date incorporated or Qualified 05/25/1984	3a . D	ate of Last Ri 03/22/19	eport 196
├ ── `	lace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21		26			59-2423871		···	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	9	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 Added t		
Zip	Country	Zip	Cot	untry		8. This corporation has liability for	intangible	e tax under s.	199.032.
24	25	29	30					□ No	
	9. Name and Address of Curren	t Registered Agent]		10. Name and Address of New R	egistered	Agent	
				81	Name				
CRUZ, MIGUEL A. 8735 WOODCREST DRIVE				82	Street Add	dress (P.O. Box Number is Not Accepta	ble)		
PORT RICHEY FL 34668				83					
PONT N	MONET FL 34000								
				84	City		FL	85 Zip (Dode
agent. La: SIGNATURE	to the provisions of Sections 617,000, egistered agont, or both, in the State in familiar with, and accept the obligation Signature, typed or perilled name of registered ago	ations of, Section 617.0503, F	Florida Sta	tutes	s. 	poration submits this statement for the ation's board of directors. I hereby acce	purpose of the app	or changing its	s registered registered
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFE	CERS AN	D DIRECTOR	S IN 12
TITLE	PD	☐ DELETE		ITLE				☐ Change	☐ Addition
NAME	CRUZ, MIGUEL		1.2 N	IAME					
STREET ADDRESS	8735 WOODCREST DRIVE		1.3 S	TREET	ADDRESS				
CITY-ST-ZIP	PORT RICHEY FL		1.4 0	ITY-S	1-ZIP				
TITLE	SD	☐ DELETE	217	ITLE				Change	☐ Addition
NAME	CRUZ, CHRISTINE		2.2 N	IAME					
STREET ADDRESS	8735 WOODCREST DR.		2.3 S	TREET	ADDRESS				
CITY-ST-ZIP	PORT RICHEY FL		2.40	CITY-S	ST - ZIP				
TITLE	π	☐ DELÉTÉ	3.1 1	NLE				Change	Addition
NAME	SOTO, ISMAEL		3.2 N	AME					
STREET ADDRESS	5948 PINE STREET		335	TREET	ADDRESS				
CITY-ST-ZIP	NEW PORT RICHEY FL		3.4. 0	CITY-S	ST - ZIP				
TITLE	D	DELETE	4.1 T	ITLE				Change	Addition
NAME	MILLER, MARTHA		4.21	NAME					
STREET ADDRESS	P. O. BOX 223 N/A		4.3 S	TREET	ADDRESS				
CITY-ST-ZIP	aripeka fl		4.4 0	ITY-S	T - 21P				

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Socion 119.07(3)(i), Florida Statutes. Turther certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - 7IP

5.1 111LE

5.2 NAME

61 TITLE

6.2 NAME

DELETE

DELFTE

, lastar

Concepción

Benigno 7849 R

Change

Change

Drive

Addition

Addition

FILED

Jan 30 1997 8:00am

Secretary of State

United Christian Assemblies, Inc.

Addition

D Carmen Concepción 7849 Royal Stewart Drive New Port Richey, FL 34652

Addition

Marin Elena Soto 5948 Pine Sti New Port Richey, Fr 34652