## **2000 UNIFORM BUSINESS REPORT (UBR)**

## Feb 09, 2000 8:00 am DOCUMENT # N11879 Secretary of State 02-09-2000 90026 001 \*\*\*\*61.25 FAITHFUL FEW HOLINESS CHURCH OF GOD, INC. Principal Place of Business Mailing Address 1771 NW 25 TERR. 2511 NW 14 STE. FT LAUDERDALE FL 33311-4529 FORT LAUDERDALE FL 33311 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2760699 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) RIGGINS, CHARLIE, JR. 1771 NORTHWEST 25TH TERRACE FORT LAUDERDALE FL 33311 Zip Code City 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 Sec 34. 45 30. William GAR Signature typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW: Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Charlie Jr. TITLE ☐ Addition TITI F ☐ Delete NAME RIGGINS, CHARLIE, JR. STREET ADDRESS STREET ADDRESS 710 NW 19 TERR Et Loud FU 33311 CITY-ST-ZIP CITY-ST-ZIP FT LAUD FL Change ☐ Addition TITLE ☐ Delete TITLE ۵V NAME NAME RIGGINS, ROSA MAE STREET ADDRESS STREET ADDRESS 1771 NW 25TH TERRACE CITY-ST-7IP CITY-ST-ZIP FT. LAUDERDALE FL Change ☐ Addition TITLE ☐ Delete TITLE istin, Speak Ruth NAME NAME AUSTIN, SARAH RUTH 1029 nw 12 Ste STREET ADDRESS STREET ADDRESS 1029 NW 12 ST. CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALEE FL 33311 ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME HARRIS, TERESA L. STREET ADDRESS STREET ADDRESS 5931 NW 15 STREET CITY-ST-ZIP CITY-ST-ZIP SUNRISE FL Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME MURAY, BARBARA H STREET ADDRESS STREET ADDRESS 725 W. DANIA BCH. BLVD. CITY-ST-ZIP CITY-ST-ZIP DANIA FL 33004 ☐ Change Addition TITLE TITLE NAME NAME MONROE, ISAIAH STREET ADDRESS STREET ADDRESS 313 NW 10 ST.

FILED

SIGNATURE: Charles Riggins Dr. CHARLIE RIGGINS JR BISHOP 1-27-2000 954-739-8065

12. I hereby certify that the information supplied with this filling 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

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changed, or on an attachment with an address, with all other like empowered.