


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2005 08:00 AM
Secretary of State

DOCUMENT # N15094 1. Entity Name FIRST ALLIANCE CHURCH OF FORT LAUDERDALE, INC.	
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Principal Place of Business 900 SOUTHWEST 31ST AVENUE FORT LAUDERDALE, FL 33312 US	Mailing Address 900 SOUTHWEST 31ST AVENUE FORT LAUDERDALE, FL 33312 US
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07012005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2665436	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

BOURNE, DOROTHY
900 SW 31ST AVE
FT LAUDERDALE, FL 33312

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PC
NAME	PHIRI GREEN
STREET ADDRESS	900 S.W. 31ST AVE.
CITY-ST-ZIP	FT LAUDERDALE, FL 33312
TITLE	VD
NAME	CAMPBELL, NEVILLE
STREET ADDRESS	900 S.W. 31ST AVE
CITY-ST-ZIP	FT. LAUDERDALE, FL 33312
TITLE	D
NAME	BRYAN, BEVERLY F
STREET ADDRESS	900 S.W. 31ST AVE
CITY-ST-ZIP	FT. LAUDERDALE, FL 33312
TITLE	TD
NAME	BOURNE, DOROTHY
STREET ADDRESS	900 S.W. 31ST AVE
CITY-ST-ZIP	FT. LAUDERDALE, FL 33312
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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07/07/05-80001-021 61.25

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-3-05

Date

954-583-1446

Daytime Phone #