

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 24, 2002 8:00 am**  
**Secretary of State**

04-24-2002 90390 036 \*\*\*\*61.25

**DOCUMENT # N16038**

1. Entity Name

**HOLLYWOOD CHURCH OF THE FIRST BORN CORPORATION**

Principal Place of Business

Mailing Address

6024 WASHINGTON STREET  
 HOLLYWOOD FL 33023  
 US

6024 WASHINGTON STREET  
 HOLLYWOOD FL 33023  
 US

2. Principal Place of Business

3. Mailing Address

*1980 SW 103rd TERRACE*

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

*MIRAMAR FLA.*

4. FEI Number

**59-2793809**

Applied For

Not Applicable

Zip

Country

Zip

Country

*33025*

*US*

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LAIDLEY, PETE A**  
**7150 GRANDVIEW BLVD**  
**HOLLYWOOD FL 33023**

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.

SIGNATURE \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  Delete  
 NAME STEWART, ERNIE  
 STREET ADDRESS 576 BRISTON STREET  
 CITY-ST-ZIP BROOKLYN NY 11212

TITLE VPD  Change  Addition  
 NAME WALTER STEPHENS  
 STREET ADDRESS 6352 HARBOR BEND  
 CITY-ST-ZIP MARGATE, FLA 33063

TITLE T  Delete  
 NAME STENNETT, HELENA D  
 STREET ADDRESS 1211 N.W. 207 STREET  
 CITY-ST-ZIP MIAMI FL 33169

TITLE TD  Change  Addition  
 NAME RUTH LASHLEY  
 STREET ADDRESS 965 THOMAS BOYLAND ST  
 CITY-ST-ZIP BROOKLYN, N.Y. 11212

TITLE VPD  Delete  
 NAME LAIDLEY, PETE  
 STREET ADDRESS 8533 S W 5TH STREET  
 CITY-ST-ZIP PEMBROKE PINES FL 33025

TITLE TD  Change  Addition  
 NAME BARBARA LAIDLEY  
 STREET ADDRESS 8533 SW 5TH ST.  
 CITY-ST-ZIP PEMBROKE PINES FLA. 33025

TITLE TD  Delete  
 NAME GLADSTONE, CLARKE  
 STREET ADDRESS 516 BRISTOL STREET  
 CITY-ST-ZIP BROOKLYN NY 11212

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE TD  Delete  
 NAME CLARKE, DONALD  
 STREET ADDRESS 395 N E 154TH STREET  
 CITY-ST-ZIP MIAMI FL 33162

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 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: *SIGNATURE*

*4-8-2002*

CP2E037 (9/01)