FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N25747

(9)

UNITED CHRISTIAN WESLEYAN METHODIST CHURCH CONFERENCE, INC.

neivoi	E, ING.								- 1111						
Principal Place of Business Mailing Address															
ST BARNABAS MIAMI DADE F US		H CON INC	MI.	5871 N W 24TH AVENUE MIAMI FL 33142-2305 US											
			•	•				3.		orporated or 0 04/1988	Qualified	3 a. D	oate of Last 04/16/19		
2. Principal f	Place of Busi	ness	28	2a. Mailing Address					FEI Num				T A	pplied	For
21				26					65-	0049521				lot App	licable
Suite, Apt	. #, etc.		<u> </u>	Suite, Apt. #, etc.				5.	Certifica	te of Status De	esired		\$8.75		
22 City & Sta	te	-,	27	City & State										Required	
23			28	28				Б.		Campaign Fin nd Contribution	•	П	\$5.00) May I I to Fee	
Zip	Zip Country			Zip Cou			у	8.							
24	25			29 30					8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No						
	9, Name		10. Name and Address of New Re				f New Reg	egistered Agent							
						81	Name								
HAMILTON, CHARLES W.							Street	Address (F	O. Box I	Number is Not	Acceptab	le)			
1470 N.W. 46TH ST. MIAMI FL 33142							,								
MIAMIF	L 33142					83									
						84	City					FL	85 Zip	Code	
i omce or i	radistarad ar	ions of Sections 617.0 gent, or both, in the St ith, and accept the ob	ลเคกเษกแ	da Silen enand	a mae allthariza.	1 1	v ine corr	l corporatio poration's b	n submits poard of c	this statemen lirectors. I here	t for the placep	Urooco o	f changing pointment as	its regis s regist	stered ered
SIGNATURE															
12.	Signature, typed	or printed name of registered			(NOTE: Registered	l Agi	ent signature					DATE			
TOTLE	-B.	OFFICERS .	AND DIRE	DEL	13. ETE 1,1 TI				ADDITION	IS/CHANGES	TO OFFIC	ERS ANI	DIRECTO Change	~	12 Addition
NAME	-	T, NAOMI			1,2 N/			S					E Change	ш,	AUUIIIUN
STREET ADDRESS 5000 NW 2ND AVENUE #1							T ADDRESS								
CITY-ST-ZIP	MIAMI F						ST - ZIP								
TITLE .	SD			DELI				S					Change	3	Addition
NAME	-MAJOR,	JUANITA			2.2 NA	ME		Row	ENA	DEVE	ب دواکست	^			İ
STREET ADDRESS	RESS - 9150 NW-7TH AVE #304			2.3 \$			r address	1940	NW	DEVE 19211 FL	6 7	- - R P /	40 F		
CITY-ST-ZIP	-MAMI-F	<u>t. </u>				TY-	ST-ZIP	MIA	mu	FL.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,		
TITLE	-0			DELE	TE 3.1 TIT	LE		V/T/	D _a (* .			Change	Z/	Addition
NAME		WILLIAM B.			3.2 NA	-		THE	BOR	EP.S	YDE	<u>e</u>			
STREET ADDRESS		51 STREET					F ADDRESS	260	1 X	EP.S U162.	MB 7	ERA	PACE		
CITY-ST-ZIP TITLE	-MAMI-F	<u> </u>		DELE			ST-ZIP	MIA	·mı j	P-L.			Channe		
NAME	D	Y, LANGSTON O.			TE 4.1 TIT 4.2 N								Change	L F	Addition
STREET ADDRESS		W 38TH COURT					ADDRESS								
CITY-ST-ZIP	MIAMI F				4.3 ST										
TITLE	D			☐ DELE		_	r - E11						Change	A	Addition
NAME	KNOWLE	ES, ALLAN			5.2 NA	ME							_ •-		
STREET ADDRESS		V 69TH TERRACE			5.3 ST	AEET	ADDRESS								ŀ
CITY-ST-ZIP	MIAMI FI				5.4 CI	Y-S	T-ZIP								
TITLE	PT		·	DELE	TE 6.1 TIT	LE							☐ Change	A	ddition
NAME		ON, CHARLES W. (BI		6.2 NA										
STREET ADDRESS	1470 NV			6.3 ST			ADDRESS								
CITY OF 740					E 4 0/3										

14. I do 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 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 panged, or on an attachment with an address.

SIGNATURE:

heodare Pilosyder

1/18/97 (305)670-9370

FILED

Jan 29 1997 8:00am

Secretary of State

CR2E037 (9/96