

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 02, 2000 8:00 am
Secretary of State

02-02-2000 90040 023 ****61.25

DOCUMENT # N29028

1. Entity Name
FIRST CHURCH OF THE OPEN BIBLE FT. LAUDERDALE, I

Principal Place of Business 1ST CHURCH OF THE OPEN BIBLE 2030 N.W. 49TH AVE. LAUDERHILL FL 33313	Mailing Address 1ST CHURCH OF THE OPEN BIBLE 2030 N.W. 49TH AVE. LAUDERHILL FL 33313-4148
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address	4. FEI Number 65-0126325	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
City & State	City & State	6. Name and Address of Current Registered Agent		
Zip	Country	Zip	Country	7. Name and Address of New Registered Agent

BAUGH, ALLAN 2030 NW 49TH ST LAUDERHILL FL 33313		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 _____ (NOTE: Registered Agent signature required when reinstating)

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

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAUGH, ALLAN		NAME		
STREET ADDRESS	4817 NW 7TH AVE		STREET ADDRESS		
CITY-ST-ZIP	PLANTATION FL 33317		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROYES, DAPHNE		NAME		
STREET ADDRESS	2030 NORTHWEST 49TH AVENUE		STREET ADDRESS		
CITY-ST-ZIP	LAUDERHILL FL 33313		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FENTON, RAOUL		NAME		
STREET ADDRESS	2030 NORTHWEST 49TH AVENUE		STREET ADDRESS		
CITY-ST-ZIP	LAUDERHILL FL 33313		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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]* **SIGNATURE REQUIRED** 01-24-00

DATE: _____ DAYTIME PHONE #: _____

CR2E037 (9/99)