2001 UNIFORM BUSINESS REPORT (UBR)

Apr 25, 2001 8:00 am Secretary of State DOCUMENT # N29028 1. Entity Name FIRST CHURCH OF THE OPEN BIBLE FT. LAUDERDALE, I. . 04-25-2001 90170 004 ****61.25 Principal Place of Business Mailing Address 1ST CHURCH OF THE OPEN BIBLE 1ST CHURCH OF THE OPEN BIBLE 2030 N.W. 49TH AVE. 2030 N.W. 49TH AVE. LAUDERHILL FL 33313 LAUDERHILL FL 33313 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0126325 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7:-Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BAUGH, ALLAN 2030 NW 49TH ST LAUDERHILL FL 33313 Zip Code FL 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** DATE Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **FEE IS \$61.25** Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Change ☐ Addition PD TITLE TITLE ☐ Delete NAME NAME BAUGH, ALLAN STREET ADDRESS STREET ADDRESS 4817 NW 7TH AVE CITY-ST-7IP CITY-ST-ZIP PLANTATION FL 33317 ☐ Delete TITLE Change Addition TITLE NAME ROYES, DAPHNE NAME STREET ADDRESS STREET ADDRESS 2030 NORTHWEST 49TH AVENUE CITY-ST-ZIP CITY-ST-ZIP. LAUDERHILL FL 33313 Change Addition TITLE ☐ Delete TITLE NAME NAME FENTON, RAOUL STREET ADDRESS STREET ADDRESS 2030 NORTHWEST 49TH AVENUE CITY-ST-ZIP CITY-ST-ZIP LAUDERHILL FL 33313 ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

SIGNATURE: SIGNARE SUPPLY

changed, or on an attachment with ar

4/19/0/

Dautime Phone #