

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 11, 2002 8:00 am**  
**Secretary of State**

09-11-2002 90105 001 \*\*\*140.00

**DOCUMENT # N37467**

1. Entity Name

**NEW MOUNT PLEASANT BAPTIST CHURCH, INCORPORATED**

Principal Place of Business

Mailing Address

7610 BISCAYNE BLVD.  
 MIAMI FL 33138  
 US

7610 BISCAYNE BLVD.  
 MIAMI FL 33138  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**65-0191909**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**ROUNDTREE, W R JR**  
**14421 NW 13 AVE RD**  
**MIAMI FL 33167**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*W.R. Roundtree Jr*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**After September 13, 2002,**  
**min. will be \$236.25.**

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 '0

TITLE	S	<input type="checkbox"/> Delete
NAME	DAVIS, JENNETTA M.	
STREET ADDRESS	5225 N.W. 30TH PLACE	
CITY-ST-ZIP	MIAMI FL 33142	
TITLE	T	<input type="checkbox"/> Delete
NAME	ALLEN, CELLESTINE	
STREET ADDRESS	8150 NW 13TH CT.	
CITY-ST-ZIP	MIAMI FL 33147	
TITLE	T	<input type="checkbox"/> Delete
NAME	FRAZIER, PATRICIA	
STREET ADDRESS	8852 NW 22 PL	
CITY-ST-ZIP	MIAMI FL 33147	
TITLE	D	<input type="checkbox"/> Delete
NAME	RICHBURG, JOHN H.	
STREET ADDRESS	1045 N.W. 117TH STREET	
CITY-ST-ZIP	MIAMI FL 33168	
TITLE	P	<input type="checkbox"/> Delete
NAME	ROUNDTREE, W.R. JR	
STREET ADDRESS	14421 NW 13 AVE RD	
CITY-ST-ZIP	MIAMI FL 33167	
TITLE	T	<input type="checkbox"/> Delete
NAME	BARLOW, KATIE J	
STREET ADDRESS	249 SW 4TH CT.	
CITY-ST-ZIP	HOMSTEAD FL 33030	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: *W.R. Roundtree Jr* **W.R. ROUNDTREE JR** **AUG 31, 2002** **305-681-2511**

CR2E037 (4/02)