

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N39969

**FILED**  
**Jun 17, 2004**  
**Secretary of State**

**Entity Name:** LIBERTY UNITED ASSEMBLY OF THE APOSTOLIC FAITH, INC.

**Current Principal Place of Business:**

4100 N.W. 167TH STREET  
MIAMI, FL 33054

**New Principal Place of Business:**

**Current Mailing Address:**

4100 N.W. 167TH STREET  
MIAMI, FL 33054

**New Mailing Address:**

**FEI Number:** 65-0213645      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BOONE, SAMUEL  
12958 SW 24TH STREET  
MIRAMAR, FL 33027    US

**Name and Address of New Registered Agent:**

WILCOX, HERMAN A  
17980 NW 2ND PLACE  
MIAMI, FL 33169    US

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: HERMAN A. WILCOX      06/17/2004  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: BOONE, SAMUEL  
Address: 12958 SW 24TH STREET  
City-St-Zip: MIRAMAR, FL 33027

Title: VD      ( ) Delete  
Name: WILCOX, HERMAN  
Address: 18331 NW 43RD COURT  
City-St-Zip: CAROL CITY, FL 33055

Title: TD      ( ) Delete  
Name: JOHNSON, WILLIE  
Address: 4001 NW 190 STREET  
City-St-Zip: MIAMI, FL 33055

Title: SD      (X) Delete  
Name: BRYANT, CATRINA  
Address: 15830 BUNCHE PARK SCHOOL DR.  
City-St-Zip: OPA LOCKA, FL 33054

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD      (X) Change ( ) Addition  
Name: WILCOX, HERMAN A  
Address: 17980 NW 2ND PLACE  
City-St-Zip: MIAMI, FL 33169

Title: TD      (X) Change ( ) Addition  
Name: WILCOX, WANDA  
Address: 18331 NW 43RD COURT  
City-St-Zip: CAROL CITY, FL 33055

Title: SD      (X) Change ( ) Addition  
Name: WILCOX, HERMAN A JR.  
Address: 2800 NW 56TH AVENUE  
City-St-Zip: LAUDERHILL, FL 33313

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HERMAN A. WILCOX      PRES      06/17/2004  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date