

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 22, 2000 8:00 am**  
**Secretary of State**

03-22-2000 90094 044 \*\*\*\*70.00

**DOCUMENT # N40310**

1. Entity Name

**THE WAY, THE TRUTH AND THE LIFE CHURCH OF PRAISE**

Principal Place of Business

5890 NW 12TH AVE  
 MIAMI FL 33147  
 US

Mailing Address

5890 NW 12TH AVE  
 MIAMI FL 33127-1338  
 US

2. Principal Place of Business

5890 NW 12th AVE  
 Suite, Apt. #, etc.

3. Mailing Address

5890 NW 12th AVE  
 Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI Florida

4. FEI Number

65-0125553

Applied For

Not Applicable

Zip

33147

Country

US

Zip

33147

Country

U.S.

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DEAN, PRISCILLA  
 3402 NW 176TH TERRACE  
 MIAMI FL 33056

7. Name and Address of New Registered Agent

Name DEAN, PRISCILLA

Street Address (P.O. Box Number is Not Acceptable)

3402 NW 176TH TERRACE

City MIAMI

FL

Zip Code 33056

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:  
 FEE IS \$61.25**

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

TITLE PD  Delete  
 NAME DAVENPORT, RUBY  
 STREET ADDRESS 3402 NW 176TH TERR  
 CITY-ST-ZIP MIAMI FL 33056

TITLE VT  Delete  
 NAME QUARLES, THOMAS  
 STREET ADDRESS 1011 NW 185TH DR  
 CITY-ST-ZIP MIAMI FL 33169

TITLE STT  Delete  
 NAME DEAN, PRISCILLA  
 STREET ADDRESS 3402 NW 176 TERR.  
 CITY-ST-ZIP MIAMI FL 33056

TITLE T  Delete  
 NAME GLOSTER, ALTHEA  
 STREET ADDRESS 1365 N.W. 30TH ST.  
 CITY-ST-ZIP N. MIAMI FL 33056

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  Change  Addition  
 NAME DAVENPORT, RUBY  
 STREET ADDRESS 3402 NW 176TH TERR  
 CITY-ST-ZIP MIAMI, FL 33056

TITLE VT  Change  Addition  
 NAME QUARLES, THOMAS  
 STREET ADDRESS 1271 N.W. 172nd St  
 CITY-ST-ZIP MIAMI, FL 33169

TITLE STT  Change  Addition  
 NAME DEAN, PRISCILLA  
 STREET ADDRESS 3402 NW 176 TERR  
 CITY-ST-ZIP MIAMI, FL 33056

TITLE T  Change  Addition  
 NAME GLOSTER, ALTHEA  
 STREET ADDRESS 1365 N.W. 30th St  
 CITY-ST-ZIP N. MIAMI, FL 33056

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  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: Ruby Davenport  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/23/00 305-430-8929  
 Date Daytime Phone #

CR2E037 (9/99)