

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **N47093** (2)  
1. Corporation Name  
**FORT LAUDERDALE CHRISTIAN CENTER MINISTRIES, INC**



Principal Place of Business Mailing Address  
**14 NW 14 AVE. FORT LAUDERDALE FL 33311** **14 NW 14 AVE. FORT LAUDERDALE FL 33311**

3. Date Incorporated or Qualified **01/30/1992** 3a. Date of Last Report **02/13/1995**

2. Principal Place of Business 2a. Mailing Address  
**904 N.W. 6 ST** **10670 N.W. 28th place**

Suite, Apt. #, etc. Suite, Apt. #, etc.  
**22** **27**

City & State City & State  
**FT. LAUDERDALE FL.** **SUNRISE FL.**

Zip Country Zip Country  
**33322 BROWARD** **33322 BROWARD**

4. FEI Number **65-0309573** Applied For  
Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent  
**MCBRIDE, WILLIE J. REV.**  
**14 NW 14 AVE.**  
**FT. LAUDERDALE FL 33311**

10. Name and Address of New Registered Agent  
81 Name **MCBRIDE, WILLIE J. REV.**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**10670 N.W. 28th place**  
83  
84 City **SUNRISE** FL 85 Zip Code **33322**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE  
NAME **MCBRIDE, WILLIE JAMES**  
STREET ADDRESS **14 NW 14TH AVE.**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33311**

TITLE **V** ☐ DELETE  
NAME **MCBRIDE, ALThERIA**  
STREET ADDRESS **14 NW 14TH AVE.**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33311**

TITLE **SD** ☐ DELETE  
NAME **ROSEMARY, NEELY**  
STREET ADDRESS **1231 NW 15TH AVE.**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33311**

TITLE **TD** ☒ DELETE  
NAME **WALKER, CHARLES**  
STREET ADDRESS **1608 NW 8TH AVE.**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33311**

TITLE **D** ☒ DELETE  
NAME **WALKER, DOROTHY**  
STREET ADDRESS **1608 NW 8TH AVE.**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33311**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P** ☐ Change ☐ Addition  
1.2 NAME **MCBRIDE WILLIE JAMES**  
1.3 STREET ADDRESS **10670 N.W. 28th place**  
1.4 CITY-ST-ZIP **SUNRISE FL. 33322**

2.1 TITLE **V** ☐ Change ☐ Addition  
2.2 NAME **MCBRIDE, ALThERIA**  
2.3 STREET ADDRESS **10670 N.W. 28th place**  
2.4 CITY-ST-ZIP **SUNRISE FL. 33322**

3.1 TITLE **SD** ☐ Change ☐ Addition  
3.2 NAME **Neely ROSEMARY**  
3.3 STREET ADDRESS **1231 N.W. 15th Ave**  
3.4 CITY-ST-ZIP **FT. LAUDERDALE FL. 33311**

4.1 TITLE **TD** ☐ Change ☐ Addition  
4.2 NAME **EDWARD SURLOCK**  
4.3 STREET ADDRESS **1930 S.W. 44 AVE APT #1**  
4.4 CITY-ST-ZIP **FT. LAUDERDALE FL. 33311**

5.1 TITLE **D** ☐ Change ☒ Addition  
5.2 NAME **CASSANDRA SURLOCK**  
5.3 STREET ADDRESS **1930 S.W. 44 AVE APT #1**  
5.4 CITY-ST-ZIP **FT. LAUDERDALE FL. 33322**

6.1 TITLE ☐ Change ☒ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**ALThERIA MCBRIDE**

June 26, 1996 (954) 742-7190