2000 UNIFORM BUSINESS REPORT (UBR)

Mar 03, 2000 8:00 am DOCUMENT # N9200000125 **Secretary of State** PRINCE OF PEACE EVANGELICAL LUTHERAN CHURCH OF W 03-03-2000 90271 010 ****61.25 Mailing Address Principal Place of Business 3100 N 75TH AVENUE 3100 N 75TH AVENUE HOLLYWOOD FL 33024-2355 HOLLYWOOD FL 33024 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-0910353 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HORNSBERGER, RANDY P 11525 NW 10TH ST PEMBROKE PINES FL 33026-4330 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 SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Change TITLE □ Delete TITLE NAME BURNS, JOYCE ~ NAME STREET ADDRESS STREET ADDRESS 5206 SW 91 AV., #1 CITY-ST-ZIP CITY-ST-ZIP COOPER CITY FL 33328 ☐ Delete TITLE ☐ Change ▼ Addition TITLE Nancy Martin 3000 N. 75 AV. Hellywood, Fl. 3302 NAME HORNBERGER, RANDY ~ CHAIRPARA NAME STREET ADDRESS 11525 N 10TH ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP. PEMBROKE PINES FL.33026 Change Addition TITLE TITLE ☐ Delete Carmen Hernandez MEMBER BROSCH, JOYCE -NAME NAME STREET ADDRESS STREET ADDRESS 8301 NW 17 CT. CITY-ST-ZIP CITY-ST-ZIE PEMBROKE PINES FL 33024 ■ Addition TITLE TITLE Delete fuente, Pia-NAME NAME STREET ADDRESS STREET ADDRESS 5060-SW-64-AV CITY-ST-7IP CITY-ST-7IP DAVIE-FL-33314 Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IF Addition ☐ Change TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

(305) IN Hornberger

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