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01-12-01 954-966-9754

2001 UNIFORM BUSINESS REPORT (UBR)

Jan 23, 2001 8:00 am Secretary of State DOCUMENT # N9200000125 01-23-2001 90003 022 ****61.25 PRINCE OF PEACE EVANGELICAL LUTHERAN CHURCH OF W Mailing Address Principal Place of Business 3100 N 75TH AVENUE 3100 N 75TH AVENUE HOLLYWOOD FL 33024 HOLLYWOOD FL 33024 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-0910353 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) HORNSBERGER, RANDY P 11525 NW 10TH ST PEMBROKE PINES FL 33026-4330 Zip Code City 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. (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: Trust Fund Contribution. **Department of State** Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition Change TITLE TITLE ☐ Delete NAME **BURNS, JOYCE** NAME STREET ADDRESS STREET ADDRESS 5206 SW 91 AV., #1 CITY-ST-7IP CITY-ST-ZIP COOPER CITY FL 33328 ☐ Change ☐ Addition ☐ Detete TITI E TITLE HORNBERGER, RANDY NAME NAME STREET ADDRESS STREET ADDRESS 11525 N 10TH ST CITY-ST-ZIP City-St-ZIP PEMBROKE PINES FL 33026 ☐ Change... ☐ Addition TITLE ~ 🖾 'Delete TITI F **BROSCH, JOYCE** NAME STREET ADDRESS STREET ADDRESS 8301 NW 17 CT. CITY-ST-ZIP CITY-ST-7IP PEMBROKE PINES FL 33024 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME MARTIN, NANCY NAME STREET ADDRESS STREET ADDRESS 3000 N 75 AVE CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33024 ☐ Change Addition ☐ Delete T/T/ F TITLE HERNANDEZ, CARMEN NAME NAME STREET ADDRESS STREET ADDRESS 4301 NW 4 CT CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL 33317 ☐ Addition REV. JUAN M. MARTIN Delete ☐ Change TITLE TITLE 3000 NW 15 Th avenue NAME STREET ADDRESS 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 in changed, or on an attachment with an address, with all other like empowered. Rev. Juan M. MARTIN Bd. MEMBER