

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N92000000708

1. Entity Name

THE CHRISTIAN UNITED FELLOWSHIP ASSOCIATION, INC

Principal Place of Business

2412 S HARBOR CITY BLVD
MELBOURNE FL 32902
US

Mailing Address

REV: WILLIE B CARTER
1122 GAINEY DR
MELBOURNE FL
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



APPROVED
AND
FILED
01 SEP 27 AM 11:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

CP

4. FEI Number 59-3179371

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CARTER, WILLIE B
1122 GAINEY DR
MELBOURNE FL 32901

Name

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

City

FL

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 _____
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
After September 12, 2001, min. will be \$236.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PT
BLACKMON, JOE N
608 E WALL ST
MELBOURNE FL 32901

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
CARTER, WILLIE B
1122 GAINEY DR
MELBOURNE FL 32901

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition
600004625506-7
-10/05/01--01081--018
*****61.25 *****61.25

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VT
DORMAN, BLANDFORD N
1455 RIVER RD
ST CLOUD FL 34769

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
ODOM, AUGUSTA JR
1621 ORANGE AVE
ST CLOUD FL 34769

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
MCINTYRE, DAVID
1049 NEWBERN ST
PALM BAY FL 32905

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

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:

Rev. Willie B. Carter

CR2E037 (5/01)