

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90226 011 ****66.25

DOCUMENT # N93000000130

1. Entity Name
GOOD SHEPHERD MENNONITE EVANGELICAL CHURCH, INC.



Principal Place of Business

**95 NE 80TH TERRACE
MIAMI FL 33138
US**

Mailing Address

**11750 NE 16TH AVE. #101
101
MIAMI FL 33161
US**

2. Principal Place of Business

11303 NE 13TH AVE

3. Mailing Address

11750 NE 16TH AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

APT #101

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33161

Country

USA

Zip

33161

Country

USA

4. FEI Number **65-0372093**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MENARD, MARTIN W
11750 NE 16TH AVE
101
MIAMI FL 33161**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

04-22-03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☒

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	MENARD, MARTIN W	
STREET ADDRESS	11750 NE 16TH AVE #307	
CITY-ST-ZIP	MIAMI FL 33161	
TITLE	TD	<input type="checkbox"/> Delete
NAME	WILLIAM, MARIETTE	
STREET ADDRESS	716 NE 85TH ST	
CITY-ST-ZIP	MIAMI FL 33138	
TITLE	S	<input type="checkbox"/> Delete
NAME	MENARD, ROSETTE	
STREET ADDRESS	11750 NE 16TH AVE #307	
CITY-ST-ZIP	MIAMI FL 33161	
TITLE	D	<input type="checkbox"/> Delete
NAME	MENARD, MARTIN W	
STREET ADDRESS	11750 N.E. 16TH AVE APT 101	
CITY-ST-ZIP	MIAMI FL 33161	
TITLE	D	<input type="checkbox"/> Delete
NAME	MENARD, ROSETTE	
STREET ADDRESS	11750 N.E. 16TH AVE APT 101	
CITY-ST-ZIP	MIAMI FL 33161	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MENARD, MARTIN W	
STREET ADDRESS	11750 NE 16TH AVE #101	
CITY-ST-ZIP	MIAMI FL 33161	
TITLE	TD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAM, MARIETTE	
STREET ADDRESS	716 NE 85TH ST	
CITY-ST-ZIP	MIAMI FL 33138	
TITLE	SD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MENARD, ROSETTE	
STREET ADDRESS	11750 NE 16TH AVE #101	
CITY-ST-ZIP	MIAMI FL 33161	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: **SIGNATURE REQUIRED**

04-22-03 (305) 891-1651

CR2E037 (10/02)