

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N93000002720

FILED
Apr 29, 2003
Secretary of State

Entity Name: PLYMOUTH CONGREGATIONAL CHURCH FOUNDATION, INC.

Current Principal Place of Business:

3400 DEVON ROAD
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

3400 DEVON ROAD
MIAMI, FL 33133

New Mailing Address:

FEI Number: 65-0433596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAGG, K L
200 SOUTH BISCAYNE BLVD.
SUITE 4900
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: WILSON, ROBERT
Address: 3400 DEVON ROAD
City-St-Zip: MIAMI, FL 33133

Title: DT () Delete
Name: ADERHOLDT, MARY M
Address: 5170 N.W. 101ST PL
City-St-Zip: MIAMI, FL 33178

Title: DV () Delete
Name: DAVIS, DIANE
Address: 3400 DEVON ROAD
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: FRIBERG, RICHARD E
Address: 7655 SW 83RD COURT
City-St-Zip: MIAMI, FL 33143

Title: D () Delete
Name: DE ARMAS, IDALBERTO M
Address: 440 SW 29TH ROAD
City-St-Zip: MIAMI, FL 33129

Title: DP () Delete
Name: MCCREA, DAVID
Address: 4821 CAMPO SANO COURT
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID MCCREA

DP

04/29/2003

Electronic Signature of Signing Officer or Director

_____ Date