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NONPROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N93000004823 (1)

LOVE AND UNITY CHRISTIAN CENTER INC.

FILED Apr 17 1998 8:00am Secretary of State

0-76-98 KEN) HOLL - (NO

| The state of the s | | | | | | | | | |
|--|--|---|-------------|-------------|--|--|------------------------|----------------|--|
| Principal Place of Business Mailing Address | | | | | | i i i i i i i i i i i i i i i i i i i | TOUR BOINT BILLEN TOUR | NATA INI ITAL | |
| 7481 NW 37TH | ст | 7481 NW 37TH CT | | | | 3. Date Incorporated or Qualified | | | |
| LAUDERHILL FL | . 33319 | LAUDERHILL FL 33319 | | | | 10/20/1993 | | | |
| บร | | US | | | | 4. FEI Number | | pplied For | |
| | | | | | | 65-0447041 | 1 1 - 1 | ot Applicable | |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | | | | | Additional | |
| 21 | | 26 | | | | 5. Certificate of Status Desired L | | equired | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | 6. Election Campaign Financing | \$5.00 | May Be | |
| 22 | | 27 | | | | Trust Fund Contribution Added to Fees | | | |
| City & State | • | City & State | | | | 7. Is this nonprofit corporation a homeowners association? | | | |
| Zip Country | | Zip Country | | | | Yes No 8. This corporation owes or has paid the current year Intangible | | | |
| 24 | 25 | <u> </u> | 30 | | | Personal Property Tax due June 30. | | tangible No | |
| 24 | 9. Name and Address of Current Registered Agent | | | | 10. Name and Address of New Registered Agent | | | | |
| | | ···· | 81 | Nam | 9 | | | | |
| JONES, | DAVID I | • | 90 | Ctron | t Addrag | os (D.O. Bay Number is Not Assessable) | | | |
| | / 37TH COURT | 82 Street Ac | | | t Muures | ss (P.O. Box Number is Not Acceptable) | | | |
| | HILL FL 33319 | 63 | | | | | | | |
| , | | | 84 | City | | | ae 7in | Code | |
| | | | 64 | City | | | FL 85 Zip | Code | |
| 11. Pursuant t | to the provisions of Sections 617.0502 | and 617.1508, Florida Statute | s, the abov | e-name | d corpor | ration submits this statement for the purpo | ose of changing if | ts registered | |
| office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. | | | | | | | | | |
| SIGNATURE _ | | | | | | | | | |
| | Signature, typed or printed name of registered agent | | | ent signatu | re required | | AND DIRECTOR | OC IN 40 | |
| 12. | OFFICERS AND | DELETE | 13. | | 1 | ADDITIONS/CHANGES TO OFFICERS | Change | Addition | |
| NAME | JONES, DAVID L REV. | | 1.2 NAME | | DER | lc Jackson | | Rodinon | |
| STREET ADDRESS | 7481 NW 37TH CT | | 1.3 STREET | ANDRECE | | | | 1 | |
| | LAUDERHILL FL 33319 | | 1.3 STREET | | 200 | O NW 85ª CT. RGATE, FL. | | | |
| CITY-ST-ZIP TITLE | D | DELETE | 2.1 TITLE | 1-211 | rriu | BGATE, Fel | ☐ Change | Addition | |
| NAME | FAMBLE, CEDRIC M | | 2.2 NAME | | 1 | | | | |
| STREET ADDRESS | 5075 NW 36TH ST APT D317 | | 2.3 STREET | ADDRESS | | | | } | |
| CITY-ST-ZIP | LAUDERHILL FL | | 2. 4 CITY- | | | · | . • | | |
| TITLE | D | ☐ DELETE | 3.1 TITLE | <u> </u> | 1 | | ☐ Change | Addition | |
| NAME | WESTBROOK, IRMA J | | 3.2 NAME | | 1 | | | [| |
| STREET ADDRESS | 1136 NW 15TH CT3 | | 3.3 STREET | ADDRESS | | | | 1 | |
| CITY-ST-ZIP | FORT LAUDERDALE FL | | 3.4. CITY- | ST-ZIP |] | | | | |
| TITLE | | ☐ DELETE | 4.1 TITLE | | Τ | | Change | Addition | |
| NAME | | | 4. 2 NAME | | 1. | and the second | Nh [[[| 1 h | |
| STREET ADDRESS | | | 4.3 STREET | ADDRESS | · | | 71/14// | ′ナ | |
| CITY-ST-ZIP | | | 4.4 CITY-S | T-ZIP | \ | | 1091 | | |
| TITLE | | L DELETE | 5.1 TITLE | | | <i>V</i> | L Change | Addition | |
| NAME | | | 5.2 NAME | | ļ | | | ļ | |
| STREET ADDRESS | | | 5.3 STREET | ADDRESS | 1 | | | | |
| CITY-ST-ZIP | | | 5.4 CITY-S | T-ZIP | ļ | | | _ | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | į | | Change | Addition | |
| NAME | | | 6.2 NAME | | | | | ل | |
| STREET ADDRESS | | | 6.3 STREET | | | | 0001 | シノゴ | |
| CITY-ST-ZIP | ertify that the information supplied with | this filing does not qualify for | 6.4 CITY-S | T-ZIP | tert in Co | action 119 07/3)(i) Florida Statutee furth | per certify that the | information | |
| 14. 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 annual report or supplemental annual 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 | | | | | | | | | |
| officer or of Block 12 of | director of the corporation or the receiv or Block 13 if changed, or on an attack | rer or trustee empowered to ex Prient with an address. | XUÇUTÜ TIIS | report 8 | is requir | eu by Chapter 617, Horida Statutes; and | тық тіу пате ар | pears in | |
| | 0 10.011 | | | | | | Oa | ام | |