

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000001561

1. Entity Name

WEST KENDALL BAPTIST CHURCH, INC. *R*

**FILED**  
**Jun 29, 2000 8:00 am**  
**Secretary of State**

06-29-2000 90633 047 \*\*\*\*61.25

Principal Place of Business

14955 SW 88 ST  
MIAMI FL 33196

Mailing Address

14955 SW 88 ST  
MIAMI FL 33196-1417

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0490324

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

**BENSON, TIM**  
14955 SW 88 ST  
MIAMI FL 33193

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**

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  
**CD**  
**GUTHRIE, CHUCK** ☒ Delete  
**7631 SW 147 COURT**  
**MIAMI FL**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Alan Topping** ☐ Change ☒ Addition  
**14450 SW 152 Court**  
**Miami, FL 33196**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D** ☐ Delete  
**LAW, WASH P**  
**13515 SW 110 TERR**  
**MIAMI FL 33186**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SD** ☒ Delete  
**PARRISH, HARRY**  
**12400 SW 100 STREET**  
**MIAMI FL**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Pedro Diaz** ☐ Change ☒ Addition  
**8123 SW 158 Place**  
**Miami FL 33196**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

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: *[Signature]*

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/7/00 305.388.8059

Date

Daytime Phone #

CR2E037 (9/99)