

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 21, 2002 8:00 am
Secretary of State

04-21-2002 90890 044 ****61.25

DOCUMENT # N94000001972

1. Entity Name

FAITH-IN-THE-CITY OF MIAMI, INC.

Principal Place of Business

137 NE 19TH ST.
MIAMI FL 33132

Mailing Address

137 NE 19TH ST.
MIAMI FL 33132

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0493036

Applied For

Not Applicable

Zip

Country

Zip

Country

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

OROVITZ, NORMA A
137 NE 19TH ST.
MIAMI FL 33132

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

Same on file

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 ☐ Delete
NAME D
STREET ADDRESS OROVITZ, NORMA
CITY-ST-ZIP 137 NE 19TH ST
MIAMI FL

TITLE ☐ Change ☐ Addition
NAME PD
STREET ADDRESS Jim Howe
CITY-ST-ZIP 8200 Dadeland Blvd #305
Miami FL

TITLE ☐ Delete
NAME PD
STREET ADDRESS WYNN, LARRY
CITY-ST-ZIP 46 NE 6 STREET
MIAMI FL 33132

TITLE ☐ Change ☐ Addition
NAME VD
STREET ADDRESS Thomas Madden SJ Rev
CITY-ST-ZIP 118 NE 2nd St
Miami FL 33132

TITLE ☐ Delete
NAME VD
STREET ADDRESS USHER, MARILYN
CITY-ST-ZIP 245 NW 8TH STREET
MIAMI FL 33136

TITLE ☐ Change ☐ Addition
NAME VD
STREET ADDRESS Mary Hardy (Rev)
CITY-ST-ZIP 245 NW 8th St
Miami FL 33136

TITLE ☐ Delete
NAME SD
STREET ADDRESS WYNN, LAQUITA
CITY-ST-ZIP 46 NE 6TH ST
MIAMI FL 33132

TITLE ☐ Change ☐ Addition
NAME VD
STREET ADDRESS Dolores Fernandez
CITY-ST-ZIP 118 NE 2nd St
Miami FL 33132

TITLE ☐ Delete
NAME VD
STREET ADDRESS HOWE, JIM
CITY-ST-ZIP 9200 DADELAND BLVD #305
MIAMI FL

TITLE ☐ Change ☐ Addition
NAME SP
STREET ADDRESS Leslie Old 2040
CITY-ST-ZIP 400 Biscayne Blvd
Miami FL 33132

TITLE ☐ Delete
NAME VD
STREET ADDRESS KAHN, JEFFREY RABBI
CITY-ST-ZIP 137 NE 19TH ST
MIAMI FL

TITLE ☐ Change ☐ Addition
NAME TD
STREET ADDRESS Joseph F Kelley
CITY-ST-ZIP 118 NE 2nd St
Miami FL 33132

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:

Joseph F Kelley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/1/02 305 861 8611

CR2E037 (9/01)