2003 NOT-FOR-PROFIT CORPORAT **UNIFORM BUSINESS REPORT (UBR)**

Jul 16, 2003 8:00 am Secrétary of State DOCUMENT # N9400005219 07-16-2003 90044 022 ****61.25 NEW RIVER BAPTIST CHURCH OF FORT LAUDERDALE. INC > Principal Place of Business Mailing Address 18500 GRIFFIN ROAD 18500 GRIFFIN ROAD FT. LAUDERDALE FL 33332 FT. LAUDERDALE FL 33332 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 65-0527958 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WEBB, RICHARD R Street Address (P.O. Box Number is Not Acceptable) 5130 S.W. 186 AVE. FT. LAUDERDALE FL 33332 City 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 DATE (NOTE: Registered Agent signature required when reinstating) o il 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be FILE NOW: FEE IS \$61.25 m Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE. Delete TITLE ☐ Change Addition WEBB, RICHARD R NAME NAME STREET ADDRESS 5130 S.W. 186 AVE. STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33332 CITY-ST-ZIP ☐ Change Addition TITLE Delete TITLE TURNER, CHARLES D NAME NAME 5811 S.W. 186 WAY STREET ADDRESS STREET ADDRESS City-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33332 **F** Delete Eurice Kong 5341 Sw 186 Ave. TITLE Addition TITLE HEWITT, ARTHUR NAME NAME STREET ADDRESS 3745 W VALLEY GREEN DRIVE STREET ADDRESS Ft. LAUDENDALE, FL 33332 CITY-ST-ZIP DAVIE FL 33328 CITY-ST-ZIP TITLE TITLE ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE: RICHARD ATRURUELEQU

954-830-0428