

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N94000005706

FILED  
Apr 29, 2003  
Secretary of State

**Entity Name:** CONGRESS OF WOMEN IN MINISTRY INCORPORATED

**Current Principal Place of Business:**

3401 NW 170 ST  
OPA LOCKA, FL 33056 US

**New Principal Place of Business:**

2124 NW 42 STREET  
MIAMI, FL 33142 US

**Current Mailing Address:**

411 NW 1ST AVE  
HALLANDALE, FL 33009

**New Mailing Address:**

632 NW 1ST STREET  
#519  
HALLANDALE, FL 33009

**FEI Number:** 65-0549852

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MCCRAE, GENEVA  
411 NW 1ST AVE  
HALLANDALE, FL 33009

**Name and Address of New Registered Agent:**

MCCRAE, GENEVA  
632 NW 1ST STREET  
#519  
HALLANDALE, FL 33009

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:

04/29/2003

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MCCRAE, GENEVA  
Address: 2124 NW 42 ST  
City-St-Zip: MIAMI, FL

Title: SD ( ) Delete  
Name: WILLIAMS, STACY E  
Address: 3601 NW 171ST STREET  
City-St-Zip: MIAMI, FL 33054

Title: TD ( ) Delete  
Name: CLAYTON, ALEXANDRIA C  
Address: 3401 NW 170TH STREET  
City-St-Zip: MIAMI, FL 33054

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: SD (X) Change ( ) Addition  
Name: REESE, SHERIDAN I  
Address: 2124 NW 42 STREET  
City-St-Zip: MIAMI, FL 33142

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: GENEVA MCCRAE

PRES

04/29/2003

Electronic Signature of Signing Officer or Director

Date