

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90091 025 ****61.25

0003119

DOCUMENT # N95000004071

1. Entity Name

THE FIRST APOSTOLIC DELIVERANCE CHURCH OF JESUS,

Principal Place of Business

Mailing Address

**2919 NORTHWEST 19TH STREET
FORT LAUDERDALE FL 33311**

**2701 N.W. 21ST STREET
FORT LAUDERDALE FL 33311**

2. Principal Place of Business

3. Mailing Address

**2919 N.W. 19TH ST
Suite, Apt. #, etc.**

**2701 N.W. 21ST
Suite, Apt. #, etc.
FORT LAUDERDALE FLA**



DO NOT WRITE IN THIS SPACE

City & State

City & State

Fort Lauderdale FLA

33311

4. FEI Number

65-0763411

Applied For

Not Applicable

Zip

Country

Zip

Country

33311

FLA

33311

FLA

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

**HAYES, EARNESTINE
2701 NW 21 STREET
FORT LAUDERDALE FL 33311**

Phyllis Howard

Street Address (P.O. Box Number is Not Acceptable)

2115 N.W. 21ST ST

Fort Lauderdale FLA

City

33311 FLA

FL

Zip Code

33311

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 **Phyllis Howard**

(NOTE: Registered Agent signature required when reinstating)

DATE

1-15-01

**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	T BUTLER, HENRY 2126 NW 27 TERR FORT LAUDERDALE FL 33311	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MCNAIR, FRANK 2790 N.W. 23RD STREET FORT LAUDERDALE FL 33311	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P EARNESTINE, HAYES 2701 NW 21ST STREET FORT LAUDERDALE FL 33311	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WASHINGTON, EARL 2701 NW 21ST STREET FORT LAUDERDALE FL 33311	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T THOMPSON, WILLIS 2862 S W 2 ST FT LAUDERDALE FL 33312	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GARDNER, ESDORN 1402 2ND ST DANIA FL 33004	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Phyllis Howard **4/7/01** **954 733 0046**

CR2E037 (10/00)