

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 MAY 23 PM 12:44

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1. Entity Name
SOUTH BROWARD CHURCH OF CHRIST, INC.



SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**2619 RODMAN STREET
HOLLYWOOD, FL 33020**

Mailing Address
**P.O. BOX 221511
HOLLYWOOD, FL 33022-1511**

2. Principal Place of Business
2619 Rodman Street
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 221511
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
Hollywood, Florida
Zip
33020
Country
USA

City & State
Hollywood, Florida
Zip
33022-1511
Country
USA BROWARD

4. FEI Number
65-0613072
Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

DAVIS, BERNARD A.
2619 RODMAN STREET
HOLLYWOOD, FL 33020

7. Name and Address of New Registered Agent
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Bernard A. Davis*
Signature, typed or printed name of registered agent and title if applicable.

5/21/2003
DATE

(NOTE: Registered Agent signature required when reinstating)

FILE NOW - FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
DAVIS, BERNARD A
2619 RODMAN STREET
HOLLYWOOD, FL 33020

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
WILLIAMS, GARY C
2624 DEWEY ST
HOLLYWOOD, FL 33020

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
BAZLE, MACKENSO
740 S PARK RD, BLDG 11, APT. 14
HOLLYWOOD, FL 33021

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
000019850010
05/23/03--01079--004 **61.25

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

TITLE
NAME
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☐ 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: *Bernard A. Davis* / **BERNARD A. DAVIS** **5/21/2003** **(954) 920-7158**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2037 (10/02)

5/21/03