

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000005913

1. Entity Name

FIRST REDEEM MISSIONARY BAPTIST CHURCH, INC.

*Handwritten signature/initials*

Principal Place of Business

Mailing Address

880 N.W. 54 STREET  
MIAMI FL 33127

880 N.W. 54 STREET  
MIAMI FL 33127

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MILLER, WILL H  
16811 NW 24TH AVE  
OPA-LOCKA FL 33056

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

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  
After September 12, 2001, min. will be \$236.25

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 PD  
NAME DANIELS, HENRY W REV  
STREET ADDRESS 1874 SW 94TH TERRACE  
CITY-ST-ZIP MIRAMAR FL 33025 ☐ Delete

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

TITLE D  
NAME MILLER, MARY GLORIA  
STREET ADDRESS 16811 N.E. 24 AVENUE  
CITY-ST-ZIP MIAMI FL 33056 ☐ Delete

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

TITLE VSTD  
NAME MILLER, WILL  
STREET ADDRESS 16811 NW 24TH AVE  
CITY-ST-ZIP OPA LOCKA FL ☐ Delete

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

TITLE D  
NAME DANIELS, DEBORAH M  
STREET ADDRESS 1874 SW 94TH TERR  
CITY-ST-ZIP MIRAMAR FL ☐ Delete

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

TITLE D  
NAME DANIELS, CLARENCE W  
STREET ADDRESS 101 NW 47TH TERRACE  
CITY-ST-ZIP MIAMI FL 33127 ☒ Delete

TITLE ☐ Change ☒ Addition  
NAME Janet E. Carter  
STREET ADDRESS 1500 NW 45th Street  
CITY-ST-ZIP Miami, FL 33142

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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: *Kentucky Daniels*

Sep 9, 2001 954-4308317

FILED  
Sep 13, 2001 8:00 am  
Secretary of State

09-13-2001 90004 047 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0736703 ☐ Applied For ☐ Not Applicable

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

CR2E037 (5/01)