

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000002796

1. Entity Name

MACEDONIA HOLINESS CHURCH, INC.

FILED
May 12, 2002 8:00 am
Secretary of State

05-12-2002 90552 033 ****61.25

Principal Place of Business

Mailing Address

2634 NW 62 ST
MIAMI FL 33147
US

JESSE M WILLIAMS
1892 N W 83 TERR
MIAMI FL 33147
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-0845927

Applied For

Not Applicable

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

COLLINS, JERRY L
1892 NW 83 TERR.
MIAMI FL 33147

Name

~~COLLINS, JERRY L.~~

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

14540 Harrison St.

City

Miami

FL

Zip Code

33176

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)

04-3-2002

DATE

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
PAST
COLLINS, JERRY L
1892 N.W. 83 TERR
MIAMI FL 33147 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PAST
Collins, Jerry L.
14540 Harrison St.
Miami FL, 33176 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
WILLIAMS, NORMAN
1892 NW 83 TERR.
MIAMI FL 33147 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
Williams, Norman
1892 N.W. 83 Terr.
Miami FL, 33147 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
ANDREWS, MILTON
1753 NW 81 TERR
MIAMI FL 33147 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
HITCHENS, BARBARA
12320 N.W. 22 CT.
Miami FL, 33167 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
ANDREWS, LUCILLE
1753 N.W. 81 TERR
MIAMI FL 33147 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
HITCHENS, BARBARA
12320 N.W. 22 CT.
MIAMI FL 33167 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
HITCHENS, BARBARA
12320 N.W. 22 CT.
MIAMI FL 33167 ☐ Delete

TITLE
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CITY-ST-ZIP
TD
HITCHENS, BARBARA
12320 N.W. 22 CT.
MIAMI FL 33167 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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:

SIGNATURE COLLINS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-3-2002

CR2E037 (9/01)