## **2000 UNIFORM BUSINESS REPORT (UBR)**

changed, or on an attachment with an address, with all other

## **FILED** May 19, 2000 8:00 am Secretary of State DOCUMENT # N96000004286 1. Entity Name ANGLICAN APOSTOLIC CHURCH INTERNATIONAL INC 05-19-2000 90058 042 \*\*\*\*61.25 Principal Place of Business Mailing Address 740 NW 43RD AVENUE 1416 SE 2ND TERR PLANTATION FL 33317-1529 DEERFIELD BEACH FL 33441 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0690362 Not Applicable Zip Zip Country-Country \$8.75 Additional Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HANLAN, RAYMOND G REV 740 NW 43RD AVENUE PLANTATION FL 33317 Zip Code City 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** DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Addition TITLE PD ☐ Delete TITLE Change NAME NAME HANLAN, RAYMOND G REV STREET ADDRESS STREET ADDRESS 740 NW 43RD AVENUE CITY-ST-ZIP CITY-ST-ZIP <u>Plantation FL 33317</u> ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME MORALES, LUCIO STREET ADDRESS STREET ADDRESS 125 NE 15TH AVENUE, APT 202 CITY-ST-ZIP CITY-ST-ZIP N. MIAMI FL 33161 □ Change ☐ Addition ☐ Delete TITLE TITLE s NAME NAME HANLAN, LEONIE STREET ADDRESS STREET ADDRESS 6510 SW 16TH CT CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33068 Addition ☐ Delete TITLE ☐ Change TITLE NAME POPE, SANDRA STREET ADDRESS STREET ADDRESS 4507 CARAMBOLA CIRCLE S. CITY-ST-ZIP CITY-ST-ZIF COCONUT CREEK FL 33066 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME FAIRWEATHER, JUNE STREET ADDRESS STREET ADDRESS 5098 NW 41ST CT CITY-ST-ZIP CITY-ST-ZIP <u>Lauderdale Lakes Fl. 33319</u> ☐ Addition ☐ Delete TITLE ☐ Change TITLE D NAME NAME KELLY, SUSAN STREET ADDRESS STREET ADDRESS 4611 SW 30TH WAY CITY-ST-ZIP CITY-ST-ZIP **DANIA FL 33312** 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

ike empowered.

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

an L

G. RAYMOND HEAVELAN