

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000006137

1. Entity Name

MT. MORIAH COMMUNITY HOLINESS CHURCH, INC.

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90062 038 *****70.00

Principal Place of Business

1085 N.W. 62ND STREET
MIAMI FL 33150

Mailing Address

518 NW 47TH TERR
MIAMI FL 33127
US

2. Principal Place of Business

5001 N.W. 17th Ave.

3. Mailing Address

518 N.W. 47th Terr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

miami FL

City & State

miami FL

Zip

33142

Country

Dade

Zip

33127

Country

Dade



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0712475

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, BISHOP M
518 NW 47TH TERR
MIAMI FL 33127

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.

SIGNATURE Bishop murray Williams

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

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

TITLE D
NAME WILLIAMS, DESSIE
STREET ADDRESS 7722 N 2 9TH AVE
CITY-ST-ZIP MIAMI FL 33150 ☐ Delete

TITLE D
NAME WILLIAMS, LILLIE
STREET ADDRESS 4401 N W 191 TH ST
CITY-ST-ZIP MIAMI FL 33055 ☐ Delete

TITLE TD
NAME WILLIAM, NATHAN
STREET ADDRESS 4401 N.W. 191ST STREET
CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE D
NAME WIMBERLY, CURLEY
STREET ADDRESS 3211 NW 169TH TERR
CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE P
NAME WILLIAMS, MURRAY
STREET ADDRESS 518 NW TERR
CITY-ST-ZIP MIAMI FL 33127 ☐ Delete

TITLE SATD
NAME CARTER, DORIS A
STREET ADDRESS 1725 N.W. 59ST #B
CITY-ST-ZIP MIAMI FL 33142 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D
NAME George Jones
STREET ADDRESS
CITY-ST-ZIP miami, FL. ☐ Change ☒ Addition

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

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

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

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

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: Anna Williams

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-29-01

(305) 687-6206
(305) 836-5091

CR2E037 (10/00)