

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

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91322 044 ****61.25

DOCUMENT # N96000006623

1. Entity Name

Deerfield Outreach Ministries INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

330 NW 1 AVE

3. Mailing Address

330 NW 1 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Deerfield Bch FLA

Deerfield Bch FLA

65-0696933

Zip

Country

Zip

Country

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

33441

Broward

33441

Broward

7. Name and Address of Current Registered Agent

Name

HICKMON NATHANIEL

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

330 NW 1 AVE

City

Deerfield Bch

FL

Zip Code

33441

**DO NOT WRITE
IN THIS SPACE**

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

FEE IS \$61.25

Initial or Amended UBR

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 NAME STREET ADDRESS CITY-ST-ZIP	<u>PO</u> <u>HICKMON NATHANIEL</u> <u>330 NW 1 AVE</u> <u>Deerfield Bch FLA 33441</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>SO</u> <u>HICKMON EVA</u> <u>330 NW 1 AVE</u> <u>Deerfield Bch FLA 33441</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>TD</u> <u>HICKMON ERICKA</u> <u>330 NW 1 AVE</u> <u>Deerfield Bch FLA 33441</u>
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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Nathaniel Hickmon

4/24/02

5612151935

CR2E037B (12/01)