

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 10, 2008 08:00 A
Secretary of State

DOCUMENT # N97000001301	
1. Entity Name UNITED CHURCH OF JESUS CHRIST (APOSTOLIC) OF MIRAMAR, INC.	

Principal Place of Business 1050 S DIXIE HWY HOLLYWOOD FL 33020	Mailing Address 3978 NW 36TH WAY LAUDERDALE LAKES FL 33309
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/07)

6. Name and Address of Current Registered Agent TAYLOR, GEORGE E 3978 NW 36 WAY FORT LAUDERDALE FL 33309	
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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. I am familiar with and accept the obligations of registered agent.	
SIGNATURE _____	DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TAYLOR, GEORGE EDWARD 3978 NW 36TH WAY LAUDERDALE LAKES FL 33309 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD TAYLOR, GLORIA MAUDE 3978 NW 36TH WAY LAUDERDALE LAKES FL 33309 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KERR, MARIA E 2816- SW 4TH PLACE FORT LAUDERDALE FL 33312 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAILY, J. 1540 NW 31 AVE OPA LOCKA FL 33054 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COOPER, MYRTELLA 490 NE 157TH TERRACE NORTH MIAMI BEACH FL 33162 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS, DAPHNY 17930 NW 40 WAY MIAMI FL 33055 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 000000855144 03/27/08-80038-007 70.00
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 exemptions contained in Section 119, 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: *George E. Taylor*

3/5/08