

2001 UNIFORM BUSINESS REPORT (UBR)DOCUMENT # **N97000003254**

1. Entity Name

RHEBA BOONE JOHNSON LAKESIDE ACADEMY CHRISTIAN E

Principal Place of Business

**130 EAST 20TH STREET
RIVIERA BEACH FL 33404**

Mailing Address

**130 EAST 20TH STREET
RIVIERA BEACH FL 33404**

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 **31-1505523**

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

**JOHNSON, RHEBA B
130 EAST 20TH STREET
RIVIERA BEACH FL 33404**

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

Signature, typed or printed name of registered agent, and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25**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	CEO	<input type="checkbox"/> Delete
NAME	JOHNSON, RHEBA B	
STREET ADDRESS	1300 W 32ND ST	
CITY-ST-ZIP	RIVIERA BCH FL 33404	

TITLE	M	<input type="checkbox"/> Delete
NAME	GREEN, CORNELIUS	
STREET ADDRESS	430 W 25TH ST	
CITY-ST-ZIP	RIVIERA BCH FL 33404	

TITLE	M	<input checked="" type="checkbox"/> Delete
NAME	MOORE, BETTY	
STREET ADDRESS	4950 NW 11 PL	
CITY-ST-ZIP	LAUDERHILL FL 33311	

TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	DORSEY, ROY	
STREET ADDRESS	105 4TH ST	
CITY-ST-ZIP	LAKE PARK FL	

TITLE	T	<input type="checkbox"/> Delete
NAME	FILER, LILLIAN	
STREET ADDRESS	802 GREEN WOOD AVE	
CITY-ST-ZIP	W PALM BCH FL	

TITLE	T	<input type="checkbox"/> Delete
NAME	GRAHAM, LOUIS	
STREET ADDRESS	1471 FOLSOM RD	
CITY-ST-ZIP	LOXAHATCHEE FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	M	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHALMA GREEN	
STREET ADDRESS	430 W. 25TH ST.	
CITY-ST-ZIP	RIVIERA BEACH, FL 33404	

TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARA FERRAZ-GRAHAM	
STREET ADDRESS	1471 FOLSOM RD	
CITY-ST-ZIP	LOXAHATCHEE, FL	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

RHEBA B. JOHNSON**7-3-01****561
848-9040****FILED
Sep 10, 2001 8:00 am
Secretary of State**

09-10-2001 90053 042 ****70.00



DO NOT WRITE IN THIS SPACE

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CR2E037 (5/01)