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

DOCUMENT # N97000003378

1. Entity Name

I'M REDEEMED OUTREACH CHRISTIAN CENTER



FILED

03 MAY - 1 PM 3:50

SECRETARY OF STATE TALLAHASSEE. FLORIDA

DO NOT WRITE IN THIS SPACE

					•			
Principal Place of Business 3. Mailing Ad			Addross		4			
		3. Mailing Address 2476 Mercury Drive					•	
McLarty Park Suite, Apt. #, etc.			DITVE					
		Suite, Apt. #, etc.			. DO NOT WRITE IN THIS SPACE			
	rton Blvd.							
City & Stat	,	1 '	City & State		4. FEI Number		Applied For	
<u>Rockle</u>	dge, FL.	Côcoa, F1.	ôĉôa, Fl.		<u> 59</u> 3451724		Not Applicable	
Zip 3295	5 Country BREVARD	Zip 32926	Country BREVA					
		• •			7. Name and Addre	ss of Current Registered A		
				lame -			90	
DO NOT WRITE				Anthony B. Fadley				
				Street Address	(P.O. Box Number is Not Acceptable) rth Indian River Drive			
	IN THIS CO	ACE	E 809 Not		ren indian Kiver Drive			
	IN THIS SP	ACE						
		••		City		FL	Zip Code	
A TI .		-		Coco	a		32922	
8. The above	e named entity submits this statement for tions of registered agent.	the purpose of changing its	registered o	office or registe	ered agent, or both, in t	the state of Florida. I am fam	iliar with, and accept	
trie Obligat	tions of registered agent.	a_{ij}						
					,			
SIGNATURE .		•						
GIGINATORE .	Signature, typed or printed name of registered agent a	nd title if applicable. (NOT)	E: Registered Age	ent signature require	ed when reinstating)	DATE		
	FEE IS \$61.25	9. Election Car	9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be	Make Check I	Make Check Payable to	
	Initial or Amended UBR				Added to Fees Florida Department of State			
	milar or Amenaea obit	1			7.000	i iorida Departir	ent of State	
10.	OFFICERS AND DIRI		<u> </u>					
TITLE	PRESIDENT	20,10110	TITLE		****			
NAME			TITLE					
STREET ADDRESS	ŞYLVIA Y. SMITH	•	NAME	200000				
CITY-ST-ZIP	A.76 Mercury Drive	26	STREET AD	1				
GITT-31-2IF		20	CITY-ST-7	ZIP				
TITLE	DILECTOR		TITLE		''' ا''' النت		uming, carriage	
NAME	Raymond Godwin		NAME			0185760		
STREET ADDRESS	6707 Mangrove Drive		STREET AD	DDRESS	05/08/0301087 008 **61.25			
CITY-ST-ZIP	Merritt Island, Fl.		CITY-ST-2	ZIP				
TITLE	DIRECTOR	<u> </u>	. TITLE .					
NAME		*****	NAME		•			
STREET ADDRESS	Melvina Hall		STREET AD	DDRESS			_	
CITY-ST-ZIP	1198 Three Meadows	Drive	CITY-ST-Z		DO	NOT WRIT	E	
	Rockledge, F1. 3295	<u> </u>	_					
TITLE	SECRETARY		TITLE		IN T	HIS SPACE	F	
NAME	Suzanne Godwin		NAME		114 1		_	
STREET ADDRESS	6707 Mangrove Drive		STREET AD					
CITY-ST-ZIP	6707 Mangrove Drive Merritt Island, Fl.	32953	CITY-ST-Z	ZIP				
TITLE	TREASURER		TITLE				· · · · · · · · · · · · · · · · · · ·	
NAME			NAME	1				
STREET ADDRESS	Orlenia Lopez		STREET AD	DRESS				
CITY-ST-ZIP	6434 Bamboo Street Cocoa, Florida 3292	- ,	CITY-ST-Z	ZIP				
TITLE	 cocoa, riorida 3292	/	TITLE					
NAME			NAME					
STREET ADDRESS				inpeéé				
			STREET AD					
CITY-ST-ZIP			CITY-ST-Z	ur I				
12. I hereby o	certify that the information supplied with t	his filing does not qualify for	the exemption	on stated in Se	ection 119.07(3)(i) Flor	rida Statutes. I further certify	that the information	

12. I nereby 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.

_					_
•	I	I A		_	
	IGN	•	··	П	_

Sylvia Y. Smith

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

4-25-03

321-639-0879

Daytime Phone #

-1

215/