

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90446 013 ****70.00

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1. Entity Name
**FAITH TEMPLE COMMUNITY DEVELOPMENT CORPORATION,
INC.**



Principal Place of Business
**1600 NW 17TH AVENUE
POMPANO BEACH FL 33060
US**

Mailing Address
**4752 NW 6TH PLACE
COCONUT CREEK FL 33063
US**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0886060**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**SHOWERS, RAYFIELD
4752 NW 6 PLACE
COCONUT CREEK FL 33063**

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

Rayfield Showers

2/7/03

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	HEATH, WILLIE RUTH	1670 NW 5TH AVENUE	POMPANO BEACH FL 33060	<input type="checkbox"/>
D	DUNDEN, BRENDA	702 BLVD CHATELAINE E	DELRAY BEACH FL 33445	<input checked="" type="checkbox"/>
D	SHOWERS, BESSIE	4752 NW 6TH PLACE	COCONUT CREEK FL 33063	<input type="checkbox"/>
D	GRANISON, APRYL	6356 WILLOWBAY CIRCLE	LAKE WORTH FL 33463	<input type="checkbox"/>
D	LEDAY, BRIDGETT	621 NW 10TH	POMPANO BEACH FL 33060	<input checked="" type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
President	Rayfield Showers	4752 NW 6TH PL.	Coconut Creek, FL. 33063	<input type="checkbox"/>	<input type="checkbox"/>
Financial Secretary/M	Bessie Showers	4752 NW 6TH PL.	Coconut Creek, FL. 33063	<input type="checkbox"/>	<input type="checkbox"/>
Treasury	Theresa Scott	1684 NW 17TH Ave # 1	Pompano Bch, FL. 33069	<input type="checkbox"/>	<input type="checkbox"/>
V. President	Willie Ruth Heath	1651 NW 6th Ave. # 55	Pompano Bch, FL. 33060	<input type="checkbox"/>	<input type="checkbox"/>
Secretary	Apryl Granison	6356 Willowbay Circle	Lake Worth, FL. 33463	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

Rayfield Showers

2/7/03 (954)984-5987

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)