

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000006596

1. Entity Name

NEWBORN FAITH DELIVERANCE M.B. CHURCH, INC.

FILED

May 14, 2002 8:00 am  
Secretary of State

05-14-2002 90212 008 \*\*\*\*61.25

Principal Place of Business

Mailing Address

9050 NW 20TH AVE  
MIAMI FL 33147

12225 NW 24TH PL  
MIAMI FL 33167

2. Principal Place of Business

3. Mailing Address

11035 NW 17TH AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
MIAMI, FL

City & State

4. FEI Number

23-0846169

Applied For

Not Applicable

Zip  
33167

Country  
US

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

PACLEY, JAMES L  
12225 NW 21TH PL  
MIAMI FL 33167

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 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  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
HALL, EDDIE LEE  
9050 NW 20TH AVE  
MIAMI FL 33147 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
HALL, EDDIE LEE  
11035 NW 17TH AVE  
MIAMI, FL 33167 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ST  
WOODS, SARAH  
9050 NW 20TH AVE  
MIAMI FL 33147 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ST  
CANNADY, MARY  
11035 NW 17TH AVE  
MIA, FL 33167 ☒ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
HUDSON, GLODEAN  
9050 NW 20TH AVE  
MIAMI FL 33147 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
HUDSON, GLODEAN  
11035 NW 17TH AVE  
MIA, FL 33167 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
HESTER, SHARON  
9050 NW 20TH AVE  
MIAMI FL 33147 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
HESTER, SHARON  
11035 NW 17TH AVE  
MIA, FL 33167 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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 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: Eddie Lee Hall

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/26/02 (305) 835-0332

CR2E037 (9/01)