

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000000667

1. Entity Name

ANCHOR BAPTIST CHURCH, INC.

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90788 008 ****61.25

Principal Place of Business
7780 WILES ROAD
CORAL SPRINGS FL 33071
US

Mailing Address
164 NW 80TH AVENUE
MARGATE FL 33063-4734
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
~~7780~~ 164 NW 80 AVE

3. Mailing Address
Suite, Apt. #, etc.

City & State
MARGATE

City & State

4. FEI Number 65-0811290

Applied For
Not Applicable

Zip 33063-4734 Country Broward

Zip Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NAIL, RICK
164 NW 80TH AVENUE
MARGATE FL 33063

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.

SIGNATURE *Rick Nail*
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

TITLE	T	<input type="checkbox"/> Delete
NAME	VAROIS, JOHN	
STREET ADDRESS	11651 ROYAL PALM BLVD., #203	
CITY-ST-ZIP	CORAL SPRINGS 33 33065	
TITLE	T	<input type="checkbox"/> Delete
NAME	RITTER, RONALD	
STREET ADDRESS	11523 NW 36TH STREET	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	
TITLE	T	<input type="checkbox"/> Delete
NAME	PORTER, KEN	
STREET ADDRESS	11020 NW 43RD COURT	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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
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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: *Rick Nail* 4/28/00 (954) 992 3616
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)