

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000002315

1. Entity Name

GOSPEL VISION MISSIONARY BAPTIST CHURCH, INC.



**FILED**  
**Sep 05, 2000 8:00 am**  
**Secretary of State**

09-05-2000 90041 047 \*\*\*\*61.25

Principal Place of Business

130 NW 36TH ST  
 730  
 MIAMI FL 33127

Mailing Address

130 NW 36TH ST  
 730  
 MIAMI FL 33127

2. Principal Place of Business

130 N.W. 36<sup>th</sup> STREET

Suite, Apt. #, etc.

130

City & State

MIAMI FL

Zip  
 33127

Country  
 DADE

3. Mailing Address

130 N.W. 36<sup>th</sup> ST

Suite, Apt. #, etc.

130

City & State

MIAMI FL

Zip  
 33127

Country  
 DADE



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0834023

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FORBES, RUFUS N REV.

1325 N.W.  
 75 Terr.  
 MIAMI FLA 33147

7. Name and Address of New Registered Agent

Name GOSPEL VISION MISSIONARY BAPTIST CHURCH

Street Address (P.O. Box Number is Not Acceptable)  
 130 N.W. 36<sup>th</sup> STREET

City MIAMI

FL

Zip Code 33127

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

After September 13, 2000 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	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PD	FORBES, RUFUS N REV.	1325 N.W. 75 Terr.	MIAMI FL 33147	<input type="checkbox"/>
TD	ROBERSON, RUTH N	3929 N.W. 194TH STREET	MIAMI FL 33056	<input checked="" type="checkbox"/>
SD	WOON, RICHARD	6720 N.E. 5TH AVENUE	MIAMI FL 33138	<input type="checkbox"/>
D	WILLIAMS, EYVONNE P	3929 N.W. 194TH STREET	MIAMI FL 33056	<input checked="" type="checkbox"/>
D	WILLIAMS, CHRISSELLE	3929 N.W. 194TH STREET	MIAMI FL 33056	<input checked="" type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
TREASURER	CAROL WHITE	3791 N.W. 197 <sup>th</sup> TERR	MIAMI FL 33169	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	BETTY NEAT	PUBLIC RELATION 130 N.W. 36 <sup>th</sup> ST	MIAMI FL 33127	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SECRETARY	KARIS FRANCIS	1325 N.W. 75 <sup>th</sup> TERR	MIAMI FL 33147	<input type="checkbox"/>	<input checked="" type="checkbox"/>
YOUTH LEADER	LISA FOSTER	5504 N.W. 15 <sup>th</sup> AVE	MIAMI FL 33142	<input type="checkbox"/>	<input checked="" type="checkbox"/>
EVANGELIST	ANDREA JACKSON	1335 N.W. 182 <sup>nd</sup> ST	MIAMI FL 33169	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SUNDAY SCHOOL SUPERINTENDENT	BRUCELEE PRATT	1325 N.W. 75 <sup>th</sup> TERR	MIAMI FL 33147	<input type="checkbox"/>	<input checked="" 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:

*Rufus N. Forbes*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/29-00  
 Date

Daytime Phone #

CR2E037 (5/00)