

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 15, 2000 8:00 am
Secretary of State

02-15-2000 90062 011 ****61.25

DOCUMENT # N98000004910

1. Entity Name
LIBERTY CHRISTIAN DISCIPLES OF CHRIST OF MIAMI.

Principal Place of Business 2455 NORTHWEST 68TH STREET MIAMI FL 33147	Mailing Address 2455 NORTHWEST 68TH STREET MIAMI FL 33147-6858
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address	4. FEI Number 65-0860705	Applied For <input type="checkbox"/>
Suite, Apt. #, etc.	Suite, Apt. #, etc.		Not Applicable <input type="checkbox"/>
City & State	City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
Zip	Country		

6. Name and Address of Current Registered Agent BOYKIN, LUTHER J 2455 NW 68 STR MIAMI FL 33147	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (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 PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME IVERY, W C PASTOR		NAME	
STREET ADDRESS 2455 NORTHWEST 68TH STREET		STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33147		CITY-ST-ZIP	
TITLE VD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME LOPEZ, CHRISTINA		NAME	
STREET ADDRESS 2455 NORTHWEST 68TH STREET		STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33147		CITY-ST-ZIP	
TITLE VD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME COOPER, LERNORD		NAME	
STREET ADDRESS 2455 NORTHWEST 68TH STREET		STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33147		CITY-ST-ZIP	
TITLE SD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME CLARK, JUANITA		NAME	
STREET ADDRESS 2455 NORTHWEST 68TH STREET		STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33147		CITY-ST-ZIP	
TITLE TD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BOYKIN, LUTHER J		NAME	
STREET ADDRESS 2455 NORTHWEST 68TH STREET		STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33147		CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PATRICK, BEVERLY SIS.		NAME	
STREET ADDRESS 2455 NORTHWEST 68TH STREET		STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33147		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, when other like empowered.

SIGNATURE: _____ DATE: **2-6-2000** DAYTIME PHONE # _____

CR2E037 (9/99)