

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000006481

1. Entity Name

HOLINESS CHURCH IN CHRIST, INC.

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90103 002 ****61.25

Principal Place of Business

Mailing Address

12141 SOUTHWEST 185TH STREET
 SOUTH MIAMI HEIGHTS FL 33177

12141 SOUTHWEST 185TH STREET
 SOUTH MIAMI HEIGHTS FL 33177-3222

2. Principal Place of Business

3. Mailing Address

12141 SW 185 ST

12141 SW 185 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Home Church

Home Church

City & State

City & State

Miami FLA

Miami FLA

Zip

Zip

33177

33177

Country

Country

DADE

DADE



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0877582

Applied For

Not Applicable

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

AMERILAWYER
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134

Name Rev. BEN JORDAN JR.

Street Address (P.O. Box Number is Not Acceptable)

12141 SW 185 ST

City

Miami

FLA FL

Zip Code

33177

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 BEN JORDAN JR.

Ben Jordan Jr.

4-25-00

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 PD ☐ Delete
 NAME JORDAN, BEN JR.
 STREET ADDRESS 12141 SOUTHWEST 185TH STREET
 CITY-ST-ZIP SOUTH MIAMI HEIGHTS FL 33177

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

TITLE SD ☐ Delete
 NAME JORDAN, JOYCE G
 STREET ADDRESS 12141 SOUTHWEST 185TH STREET
 CITY-ST-ZIP SOUTH MIAMI HEIGHTS FL 33177

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

TITLE TD ☐ Delete
 NAME RAMOS, ANDREW
 STREET ADDRESS 12141 SOUTHWEST 185TH STREET
 CITY-ST-ZIP SOUTH MIAMI HEIGHTS FL 33177

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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 CITY-ST-ZIP

TITLE ☐ Change ☐ 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: **SIGNATURE REQUIRED** Ben Jordan Jr 4-25-00 (305) 2541726
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)