

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000001681

1. Entity Name

INTERNATIONAL UNITED PENTECOSATAL FELLOWSHIP, IN

Principal Place of Business

3050 NORTHWEST 12TH STREET  
FT. LAUDERDALE FL 33311

Mailing Address

3050 NORTHWEST 12TH STREET  
FT. LAUDERDALE FL 33311

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

~~CARTWRIGHT, HARCOURT~~  
3050 NORTHWEST 12TH STREET  
FT. LAUDERDALE FL 33311

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

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 12, 2001, 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  
DP  
LEWIS, MOSES  
ROUTE 4 BOX 255  
SYLVANIA GA 30467 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
JOSEY, LEONARD  
505 SUNSET RD.  
BOYNTON BEACH FL 33425 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DS  
PINDER, HURBERT  
P.O. BOX 5871  
NASSAU, BAHAMAS ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
CARTWRIGHT, HARCOURT  
3390 NORTHWEST 7TH COURT  
FT. LAUDERDALE FL 33311 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE  
NAME  
STREET ADDRESS  
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☐ Change ☐ Addition

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NAME  
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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: *Harcourt A Cartwright* 8/14/2001 954-583-2035

**FILED**  
**Aug 14, 2001 8:00 am**  
**Secretary of State**

02-21-2001 90018 019 \*\*\*\*70.00



DO NOT WRITE IN THIS SPACE

4. FEI Number **15-1050422** **APPLIED FOR** ☐ Applied For ☐ Not Applicable

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

0008842

CR2E037 (5/01)



Department of the Treasury  
Internal Revenue Service

ATLANTA, GA 39901

*Attachment 11238*

*W99000001681*

In reply refer to: 0716921793  
July 24, 2001 LTR 147C  
65-1050422 000000 00

01063

INTERNATIONAL UNITED PENTECOSTAL  
% HARCOURT CARTWRIGHT DIRECTOR  
3050 NW 12TH ST  
FT LAUDERDALE FL 33311-6507902

~~Employer Identification Number: 65-1050422~~

IRS Control Number:

Dear Taxpayer:

Thank you for the inquiry dated July 13, 2001.

Your employer identification number (EIN) is 65-1050422. Please keep this number in your permanent records. You should enter your name and your EIN, exactly as shown above, on all business federal tax forms that require its use, and on any related correspondence or documents.

If you have any questions, please call us toll free at 1-800-829-1040. If you prefer, you may write to us at the address shown at the top of the first page of this letter.

Whenever you write, please include this letter and, in the spaces below, give us your telephone number with the hours we can reach you. Also, you may want to keep a copy of this letter for your records.

Telephone Number ( ) \_\_\_\_\_ Hours \_\_\_\_\_

We apologize for any inconvenience we may have caused you, and thank you for your cooperation.

Sincerely yours,

*Henry J. Duckemin Jr.*

Carolyn Chapman  
Chief, Accounts Management Br. II

Enclosure(s):  
Copy of this letter