

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 09, 2000 8:00 am
Secretary of State

03-09-2000 90086 040 ****61.25

DOCUMENT # N99000002190

1. Entity Name

TRIUMPHANT CHURCH OF JESUS CHRIST, INC. OF MIRAM

Principal Place of Business

Mailing Address

**2322 S.W. 60TH TERR
 MIRAMAR FL 33023**

**2322 S.W. 60TH TERR
 MIRAMAR FL 33023-2938**

C0034861



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0907340

Applied For

Not Applicable

Zip

Country

Zip

Country

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

Name

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

City

FL

Zip Code

**CAMPBELL, MORRIS
 15694 N.W. 41ST AVE.
 MIAMI FL 33054**

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**

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 NAME STREET ADDRESS CITY-ST-ZIP	DP CAMPBELL, MORRIS 15694 N.W. 41ST AVE. MIAMI FL 33054	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT CAMPBELL, DOROTHY 15694 N.W. 41ST AVE. MIAMI FL 33054	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP DOUGLAS, LLOYD B 4080 N.W. 8TH TERR. OAKLAND PARK FL 33309	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS DOUGLAS, GLORIA 4080 N.W. 8TH TERR. OAKLAND PARK FL 33309	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAT THOMAS, CLARA 4501 N.W. 12TH ST. LAUDERHILL FL 33313	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sherrol Riley 8208 NW 14th St. Coral Springs, FL 33071	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Chrisetta Philips-Daniel 3900 SW 52nd Ave. # 103 Pembroke Pines, FL 33023	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS 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:

Morris Campbell
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date: 3/2/00 Daytime Phone #: 305/622-9412

CR2E037 (9/99)