2003 NOT-FOR-PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **N99000002820**

CENTRAL ALLIANCE CHURCH OF THE CHRISTIAN AND MIS SIONARY ALLIANCE, INC.



Principal Place of Business CENTRAL ALLIANCE CHURCH 777 N.W. 10ETH ST. MIAMI FL 33150

Mailing Address

CENTRAL ALLIANCE CHURCH 777 N.W. 106TH ST. MIAMI FL 33150

2. Principal Place of B	Some	3. Mailing Address SAME	
Suite, Apt. #, etc.	 	Suite, Apt. #, etc.	··- ··-
City & State		City & State	

FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 91280 047 ****61.25

11023053



☐ CHECK HERE IF MAKING CHANGES

City & State	The same of the sa	City & State			-4FEI Number 59-1050681	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			
SCHMIDY, GARY 1031 N.W. 150TH ST. MIAMYFL 33168 Washington State			Street Address (F	Bith S. Evans P.O. Box Number is Not Acceptable) 5- A.W. 127+2 Stress		
/ \		hmite this statement for the purpose of changing its			h Miomi F	<u> </u>

the obligations of registered agent.

FILE NOW: FEE IS \$61.25 ~

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State -

ij.		1					
10.	OFFICERS AND DIRECTORS	3	11.	ADDITIONS/CHANG	ES TO OFFICERS AND DI	RECTORS IN	10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD EVANS, JUDITH 125 N.W. 127TH STREET NORTH MIAMI FL 33168	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SALVOG, DEAN 14525 N.W. 13TH AVE MIAMI FL 33167	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KEMPER, DEBORAH 118 LAKE EMERALD DRIVE #207 OAKLAND PARK FL 33309	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	RENY J. Inc 2380 J.W. 102 MIRAMAR, FI	Rohom, Sec 1.20 AVE. 1.33025	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	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: