

2000 UNIFORM BUSINESS REPORT (UBR)

5/

FILED

Jun 23, 2000 8:00 am
Secretary of State

05-26-2000 90112 023 ****61.25

DOCUMENT # N99000003476

1. Entity Name

EBENEZER PAN-AFRICAN DEVELOPMENT ORGANIZATION, I

Principal Place of Business

5780 NW 60TH AVENUE
SUITE #F-201
TAMARAC FL 33319

Mailing Address

5780 NW 60TH AVENUE
SUITE #F-201
TAMARAC FL 33319-2306

2. Principal Place of Business

3500 N STATE ROAD 7

Suite, Apt. #, etc.
440

City & State
LAUDERDALE LAKES, FL

Zip
33319

Country
USA

3. Mailing Address

3500 N STATE ROAD 7

Suite, Apt. #, etc.
440

City & State
LAUDERDALE LAKES, FL

Zip
33319

Country
USA

4. FEI Number
65-0924662

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

WHITE, JO-MARIE
5780 NW 60TH AVENUE
SUITE #F-201
TAMARAC FL 33319

7. Name and Address of New Registered Agent

Name
JO-MARIE WHITE

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

6454 NW 65TH TERRACE

City
PARKLAND

FL

Zip Code
33067

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 JO-MARIE WHITE
Signature, typed or printed name of registered agent and title if applicable.

Jo-Marie White
(NOTE: Registered Agent signature required when reinstating)

5/5/2000
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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BAILEY, KINGSLEY E
5780 NW 60TH AVENUE
TAMARAC FL 33319 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TSD
WHITE, JO-MARIE
5780 NW 60TH AVENUE
TAMARAC FL 33319 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MAHARAJ, OMAR D
2116 N.W. 76TH WAY
MARGATE FL 33063 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
AMAN, LARRY
5780 NW 60TH AVENUE
TAMARAC FL 33319 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
EDWARDS, MARGARET
5780 NW 60TH AVENUE
TAMARAC FL 33319 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
THOMPSON, PATRICK REV.
5780 NW 60TH AVENUE
TAMARAC FL 33319 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
Winston Thompson
1311 SW 102 Avenue
Pembroke Pines, Florida 33025 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CHAIRMAN/DIRECTOR
BAILEY, KINGSLEY E
6454 NW 65TH TERRACE
PARKLAND FL 33067 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TSD
WHITE JO-MARIE
6454 NW 65TH TERRACE
PARKLAND, FL 33067 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
EDWARDS, MARGARET
3500 N STATE ROAD 7
LAUDERDALE FL 33319 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
THOMPSON, PATRICK REV.
6454 NW 65TH TERRACE
PARKLAND, FL 33067 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
THOMPSON, PATRICK REV.
6454 NW 65TH TERRACE
PARKLAND, FL 33067 ☐ 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:

SIGNATURE REQUIRED

Jo-Marie White 6/5/00 (934) 495-7757

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)