

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000003648

1. Entity Name

PRATT CHAPEL AFRICAN METHODIST EPISCOPAL INC.

FILED

Feb 28, 2002 8:00 am  
Secretary of State

02-28-2002 90024 031 \*\*\*\*61.25

Principal Place of Business

Mailing Address

10711 S.W. 216TH STREET #122A  
MIAMI FL 33189

10711 S.W. 216TH STREET #122A  
MIAMI FL 33189

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0976746

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

COFFEY, BEVERLY J  
12841 S.W. 216 TERR.  
MIAMI FL 33189

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

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 ☐ Delete  
NAME PD  
STREET ADDRESS COFFEY, BEVERLY J  
CITY-ST-ZIP 12841 S.W. 216 TERR.  
MIAMI FL 33189

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

TITLE ☐ Delete  
NAME D  
STREET ADDRESS JOHNSON, RENETTA Y  
CITY-ST-ZIP 17430 N.E. 37 AVENUE  
MIAMI FL 33055

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

TITLE ☐ Delete  
NAME D  
STREET ADDRESS WALKER, LINDA ANNAKIE  
CITY-ST-ZIP 20176 S.W. 99 COURT  
MIAMI FL 33190

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

TITLE ☐ Delete  
NAME D  
STREET ADDRESS GRANT, HATTIE  
CITY-ST-ZIP 26242 S.W. 139 AVE.  
NARANJA FL 33032

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

TITLE ☐ Delete  
NAME SD  
STREET ADDRESS HARRINGTON, LAWANDA  
CITY-ST-ZIP 17430 N.W. 37 AVENUE  
MIAMI FL 33056

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

TITLE ☐ Delete  
NAME D  
STREET ADDRESS EPKINS, BRENDA  
CITY-ST-ZIP 10711 S.W. 216TH STREET #122A  
MIAMI FL 33189

☐ Change ☐ Addition  
TITLE  
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:

*Beverly J. Coffey* BEVERLY J. COFFEY, Pastor 2/17/02 - 305-265-8808  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)