

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91266 004 ****70.00

DOCUMENT # N99000003711

1. Entity Name

MIAMI DISTRICT CAMPUS MINISTRY, INC.

Principal Place of Business

Mailing Address

**1210 STANFORD DRIVE
 UNIV. OF MIAMI
 CORAL GABLES FL 33146**

**P.O. BOX 248225
 CORAL GABLES FL 33124**

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

59-0782461

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCINTOSH, DELANO M REV
 WESLEY FOUNDATION UNIV. OF MIAMI
 1210 STANFORD DRIVE
 MIAMI FL 33146**

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	C	<input checked="" type="checkbox"/> Delete
NAME	MCMILLAN, MEREDITH REV.	
STREET ADDRESS	205 NE 87TH STREET	
CITY-ST-ZIP	MIAMI FL 33138	
TITLE	VC	<input checked="" type="checkbox"/> Delete
NAME	HAMMOND, CRAIG REV	
STREET ADDRESS	536 CORAL WAY	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE	D	<input type="checkbox"/> Delete
NAME	CLARK, STEVE MR	
STREET ADDRESS	9300 SW 77TH AVE	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	BALDESSARI, JON MR	
STREET ADDRESS	1211 DICKINSON DR	
CITY-ST-ZIP	CORAL GABLES FL 33146	
TITLE	S	<input type="checkbox"/> Delete
NAME	JARRETT, GERTRUDE MS	
STREET ADDRESS	17037 NW 66 CT	
CITY-ST-ZIP	HIALEAH FL 33015	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ADAMS, KIM MS	
STREET ADDRESS	8139 SW 209 STREET	
CITY-ST-ZIP	MIAMI FL 33189	

TITLE	C	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Mary Susan Ward	
STREET ADDRESS	4360 Lennox Dr.	
CITY-ST-ZIP	Coconut Grove, FL 33133	
TITLE	VC	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mark Caldwell	
STREET ADDRESS	14800 NW 67th Ave.	
CITY-ST-ZIP	Miami Lakes, FL 33014	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Steve Clark	
STREET ADDRESS	9300 SW 77th Ave.	
CITY-ST-ZIP	Miami, FL 33156	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Robert Gray	
STREET ADDRESS	7421 SW 55th Ave,	
CITY-ST-ZIP	Miami, FL 33143	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Glen Cardwell	
STREET ADDRESS	16580 SW 77th Court	
CITY-ST-ZIP	Miami, FL 33157	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Marta Burke	
STREET ADDRESS	5275 Sunset Dr.	
CITY-ST-ZIP	Miami, FL 33143	

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: *Delano M. McIntosh*
The Rev. Delano M. McIntosh
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 1, 2002 (305) 661-1695
 Date Daytime Phone #

CR2E037 (9/01)

attachment

#N 99000003711

Block 11 continued: UBR #N99000003711 All are ADDITIONS

433547

D
Dan Bell
100 Causarina Concourse
Coral Gables, FL 33014

D
Trish Bell
100 Causarina Concourse
Coral Gables, FL 33014

D
Betsy Harrington
2901 Granada Blvd.
Coral Gables, FL 33134

D
Mayda Mora
M-1921 SW 82nd Place
Miami, FL 33155

D
Yan Chan
1210 Stanford Dr. # 4
Coral Gables, FL 33146

D
Gilbertson Cuffy
1210 Stanford Dr. # 7
Coral Gables, FL 33146

N9900000371

attachment

Block 11 continued: UBR #N99000003711 To be DELETED

433547

D
Kim Adams
910 10th St.
Miami Beach, FL 33139

D
Vi Legge
4350 SW 129 Place
Miami, FL 33175

D
Margaret Cox
9385 SW 77th Ave.
Apt.30311
Miami, FL 33156

D
Drew Anderson
1101 Stanford Dr.
#00250
Coral Gables, FL 33124

D
Willie Blanco
16436 Briar Patch Place
Miami Lakes, FL 33014

D
Rene Ramirez
133 Ponce de Leon Blvd.
Coral Gables, FL 33134

D
Juan Ramos
10755 SW 122 Street
Miami, FL 33176

D
Michael Hutcherson
6565 Red Road
Coral Gables, FL 33143