

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2002 8:00 am
Secretary of State

03-13-2002 90124 008 ****70.00

DOCUMENT # N99000006103

1. Entity Name

**CHURCH OF THE OPEN DOOR (CONGREGATIONAL) UNITED
 CHURCH OF CHRIST, INC.**

Principal Place of Business

Mailing Address

**6001 NW 8 AVE
 MIAMI FL 33127**

**6001 NW 8 AVE
 MIAMI FL 33127**

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

52-1269438

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

**MACK, ASTRID K
 5020 NW FIRST AVE
 MIAMI FL 33127-2103**

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	D	<input checked="" type="checkbox"/> Delete
NAME	BEATTY, PRISCILLA	
STREET ADDRESS	441 GRAND CONCOURSE	
CITY-ST-ZIP	MIAMI SHORES FL 33138	
TITLE	D	<input type="checkbox"/> Delete
NAME	CLARKE, WILLIAM III	
STREET ADDRESS	7365 N AUGUSTA DRIVE	
CITY-ST-ZIP	MIAMI FL 33015	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	CLENANCE, KERVIN	
STREET ADDRESS	1112 W WESTON ROAD #188	
CITY-ST-ZIP	WESTON FL 33326	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HURD, NORMAN	
STREET ADDRESS	4563 NW 33 AVE	
CITY-ST-ZIP	MIAMI FL 33142	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	JENKINS, NELSON	
STREET ADDRESS	18825 NW 14 AVE ROAD	
CITY-ST-ZIP	MIAMI FL 33169	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	JOHNSON, WILLIE F	
STREET ADDRESS	13063 NE 8 STREET	
CITY-ST-ZIP	PEMBROKE PINES FL 33028	

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Johnson, Stanley E.	
STREET ADDRESS	201 NW 7 St., Apt#304	
CITY-ST-ZIP	Miami, FL 33136	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Archie, Shirley	
STREET ADDRESS	2000 NW 83 St.	
CITY-ST-ZIP	Miami, FL 33147	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Lawson, Lorene	
STREET ADDRESS	4710 NW 11 Ave.	
CITY-ST-ZIP	Miami, FL 33127	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Bradshaw, Linda	
STREET ADDRESS	7110 Granada Blvd.	
CITY-ST-ZIP	Miramar, FL 33023	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Lockhart, Harvey	
STREET ADDRESS	1220 NE 215 St.	
CITY-ST-ZIP	Miami, FL 33179	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Levarity, Keith	
STREET ADDRESS	1390 Little River Dr.	
CITY-ST-ZIP	Miami, FL 33146	

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: *Stanley E. Johnson* CHAIRMAN OF BOARD OF DIRECTORS, CHURCH OF THE OPEN DOOR
 2/26/02 (305) 759-0373
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)

Attachment

CHANGES TO OFFICERS AND DIRECTORS Cont.
(additions)

N99000006103

4/23/95

D
Joseph, Paul
16140 SW 87 Ave.
Miami, FL 33157

D
Torres, Latrese
1365 NW 91 Street
Miami, FL 33147

D
Vickers, Joy
7946 NW 162 St.
Miami Lakes, FL 33016

Asst. Treasurer
Vaught, Woodard
5221 NW 5 Ave.
Miami, FL 33127

D
Cobb, Herbert Sr.
833 NW 74 St.
Miami, FL 33150