


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 16, 2004 08:00 AM
Secretary of State

DOCUMENT # N9900Q006103

1. Entity Name
CHURCH OF THE OPEN DOOR (CONGREGATIONAL)
UNITED CHURCH OF CHRIST, INC.



Principal Place of Business: 6001 NW 8 AVE, MIAMI, FL 33127
Mailing Address: 6001 NW 8 AVE, MIAMI, FL 33127

DO NOT WRITE IN THIS SPACE



06302004 No Chg-NP CR2E037 (10/03)

4. FE Number: 52-1269438 Applied For: Not Applicable

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

6. Name and Address of Current Registered Agent

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

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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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

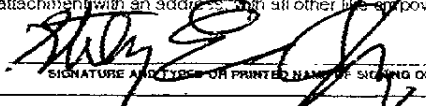
U00000165730
07/16/04-80008-020 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JOHNSON, STANLEY E 201 NW 7 ST, APT #304 MIAMI, FL 33136
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CLARKE, WILLIAM III 7365 N AUGUSTA DRIVE MIAMI, FL 33015
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ARCHIE, SHIRLEY 2000 NW 83 ST. MIAMI, FL 33147
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CURB, HERBERT 833 NW 74 STREET MIAMI, FL 33150
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BRADSHAW, LINDA 7110 GRANADA BLVD. MIRAMAR, FL 33023
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROBINSON, GWENDOLYN 20105 NE 10 PLACE MIAMI, FL 33179

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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 lists empowered.

SIGNATURE:  **STANLEY E JOHNSON JR**
 SECRETARY OF TRUSTEES
 7/14/04 (305)259-0373
 SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Payable Price #