

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000825

Entity Name: PEMBROKE PARK CHURCH OF CHRIST, BROWARD COUNTY, INC.**FILED**
Apr 22, 2015
Secretary of State
CC4725107483**Current Principal Place of Business:**3707 S.W. 56 AVE.
PEMBROKE PARK, FL 33023**Current Mailing Address:**3707 S.W. 56 AVE.
PEMBROKE PARK, FL 33023 US**FEI Number: 65-0394118****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**BARNARD, LARRY D
1215 KASIM ST
OPA LOCKA, FL 33054 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PD
Name	FINCH, ROY
Address	17201 N.W. 41ST AVE.
City-State-Zip:	MIAMI FL 33055

Title	VD
Name	WILLIAMS, HERBERT
Address	2940 N.W. 174TH ST.
City-State-Zip:	MIAMI FL 33056

Title	SD
Name	JOHNSON, JASPER
Address	3420 SW 147 AVE
City-State-Zip:	MIRAMAR FL 33027

Title	TD
Name	BARNARD, LARRY
Address	1215 KASIM ST.
City-State-Zip:	OPA LOCKA FL 33054

Title	D
Name	AUSTIN, SAMUEL
Address	913 NW 206 TERRACE
City-State-Zip:	MIAMI GARDENS FL 33169

Title	D
Name	BRINSON, MARCUS
Address	18781 NW 79 CT
City-State-Zip:	MIAMI FL 33015

Title	DIRECTOR
Name	ALEXANDER, LC
Address	3800 NW 175 STREET
City-State-Zip:	MIAMI GARDENS FL 33055

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LARRY D BARNARD SR**TREASURER****04/22/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date