FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 9:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **700112** **(6)**

1. Corporation Name
MIAMI BAPTIST ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3520 SW 97TH AVE. MIAMI FL 33165	3520 SW 97TH AVE. MIAMI FL 33165

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/04/1959
3a. Date of Last Report: 04/27/1994
4. FEI Number: 59-0914210 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 Street: 7855 S.W. 104 St.	26 Street: 7855 S.W. 104 St.
22 Suite, Apt. #, etc.: Suite 210	27 Suite, Apt. #, etc.: Suite 210
23 City & State: Miami FL	28 City & State: Miami FL
24 Zip: 33156 25 Country: U.S.	29 Zip: 33156 30 Country: U.S.

5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WETHERINGTON, DOYLE L
3520 SW 97TH AVE
MIAMI FL 33165

10. Name and Address of New Registered Agent

81 Name: Cleeland, David
82 Street Address (P.O. Box Number is Not Acceptable): 7855 S.W. 104 St.
83: Suite 210
84 City: Miami **FL** 85 Zip Code: 33156

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] David Cleeland, Executive Director — 4/26/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VPD	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	CLEELAND, DAVID	1.2 NAME	David Lema, Jr.	
STREET ADDRESS	5911 W FLAGLER ST	1.3 STREET ADDRESS	3195 W. 7 Ave.	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	Hialeah, FL 33012	
TITLE	PD	2.1 TITLE	VPD	☒ Change ☐ Addition
NAME	GARVIN, JOSHUA	2.2 NAME	Tom Thompson	
STREET ADDRESS	5005 NW 173 DR.	2.3 STREET ADDRESS	50 N.E. 128 St.	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	North Miami, FL 33161	
TITLE	SD	3.1 TITLE	SD	☒ Change ☐ Addition
NAME	SANDALL, MARY	3.2 NAME	Simard, Sybilla	
STREET ADDRESS	443 GIRALDA AVE	3.3 STREET ADDRESS	6250 S.W. 21 St.	
CITY-ST-ZIP	CORAL GALBLES FL	3.4 CITY-ST-ZIP	Miami, FL 33155	
TITLE	SD	4.1 TITLE		☐ Change ☐ Addition
NAME	ELLIOTT, LUCILLE	4.2 NAME		
STREET ADDRESS	11821 SW 107 CT	4.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP		
TITLE	TD	5.1 TITLE		☐ Change ☐ Addition
NAME	ELLIOTT, MORRIS	5.2 NAME		
STREET ADDRESS	11851 SW 107TH CT.	5.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	5.4 CITY-ST-ZIP		
TITLE	VTD	6.1 TITLE		☐ Change ☐ Addition
NAME	HARRIS, MITCHELL	6.2 NAME		
STREET ADDRESS	1540 CATALONIA AVE.	6.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL GABLES FL	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] Apr 19, 1995 (305) 266-4426
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

604811