

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # 700337 (9)**  
1. Corporation Name  
**BEREAN BAPTIST CHURCH, INC.**



Principal Place of Business: **1016 N.E. 37 ST. OAKLAND PARK FL 33334**  
Mailing Address: **1016 N.E. 37 ST. OAKLAND PARK FL 33334**

3. Date Incorporated or Qualified: **01/18/1960**  
3a. Date of Last Report: **10/16/1995**

2. Principal Place of Business: **21 1016 N.E. 37 St**  
Suite, Apt. #, etc.  
2a. Mailing Address: **26 1016 N.E. 37 St**  
Suite, Apt. #, etc.

4. FEI Number: **16-0322713**  
Applied For:  Not Applicable:

23 City & State: **Oakland Park, FL.**  
28 City & State: **Oakland Park, FL.**  
24 Zip: **33334** 25 Country: **Broward** 29 Zip: **33334** 30 Country: **Broward**

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent  
**JEAN-PIERRE, ELIE REV.  
2517 S.W. 6 CT  
FT. LAUDERDALE FL 33312**

10. Name and Address of New Registered Agent  
B1 Name: **Elie Jean-Pierre**  
B2 Street Address (P.O. Box Number is Not Acceptable): **2517 S.W. 6 Ct**  
B3 City: **Fort-Lauderdale, FL.**  
B4 City: **FL** B5 Zip Code: **33312**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: *Elie Jean Pierre* DATE: **3-30-96**

12. OFFICERS AND DIRECTORS

TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>JEAN-PIERRE, ELIE</b>	
STREET ADDRESS	<b>2517 SW 6TH COURT</b>	
CITY-ST-ZIP	<b>FT. LAUDERDALE FL</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>JEAN-CLAUDE, CHARLES</b>	
STREET ADDRESS	<b>610 NWE 7TH COURT</b>	
CITY-ST-ZIP	<b>POMPANO BEACH FL</b>	
TITLE	<b>V</b>	<input type="checkbox"/> DELETE
NAME	<b>REIMBOLD, PHILISTIN</b>	
STREET ADDRESS	<b>318 S.W. 27TH COURT</b>	
CITY-ST-ZIP	<b>FT. LAUDERDALE FL</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>JEAN-PIERRE, ELIPHAITE</b>	
STREET ADDRESS	<b>130 N.E. 12TH ST.</b>	
CITY-ST-ZIP	<b>POMPANO BEACH FL</b>	
TITLE	<b>T</b>	<input type="checkbox"/> DELETE
NAME	<b>PIERRE, FRITO</b>	
STREET ADDRESS	<b>3541 NW 33RD AVE.</b>	
CITY-ST-ZIP	<b>FT. LAUDERDALE FL</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>PERICLES, DASSAS S</b>	
STREET ADDRESS	<b>701 N.W. 10 ST.</b>	
CITY-ST-ZIP	<b>POMPANO BEACH FL 33060</b>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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, changed or on an attachment with an address.

SIGNATURE: *Elie Jean Pierre* DATE: **3-30-96** Day/Time Phone #: **954-568-1659**

CR2E037 (12/95)