2004 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT



03-17-2004 90019 037 ****70.00 **DOCUMENT #756640** FLAMINGO ROAD BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 14000364 12401 STIRLING ROAD 12401 STIRLING ROAD FT LAUDERDALE, FL 33330 FT LAUDERDALE, FL 33330 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03122004 Chg-NP CR2E037 (10/03) 4. FEI Number 59-1953931 City & State Applied For City & State Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent **GRAMLING, TROY** 12305 GARDEN DRIVE Street Address (P.O. Box Number is Not Acceptable) COOPER CITY, FL 33026 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be Make check payable to Filing Fee Is \$61.25 Trust Fund Contribution. Florida Department of State Due by May 1, 2004 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 -OFFICERS AND DIRECTORS 10. 11. PDC ---TITLE TITLE ☐ Delete ☐ Change ☐ Addition GRAMLING, TROY NAME NAME 12305 GARDEN DRIVE STREET ADDRESS STREET ADDRESS COOPER CITY, FL 33026 CITY-ST-ZIP CITY-ST-7IP VCD i ☐ Delete TITLE TITLE Change ☐ Addition JOHNSON, ALFRED NAME NAME 13276 N.W. 16TH STREET STREET ADDRESS STREET ADDRESS PEMBROKE PINES, FL 33028 CITY-ST-ZIP CITY-ST-ZIE SD TITLE Delete TITLE Change Addition HEATHER MOLTER MIZE, ESPY NAME NAME SOID YORK LANE 5241°S:W. 115TH AVENUE STREET ADDRESS STREET ADDRESS DAVIE, FL 33331 CITY-ST-ZIP COOPER CITY, FL 33330 CITY-ST-ZIP ☐ Delete TITLE TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 in the corporation of the corporation of 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 in the corporation of the corporat

CITY-ST-ZIP

STREET ADDRESS

TITLE NAME

Delete

NAME

STREET ADDRESS CITY-ST-ZIP

FILED Mar 17, 2004 8:00 am

Secretary of State