

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

65 APR 28 PM 7:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N02408 (5)

1. Corporation Name

NEW JERUSALEM MISSIONARY BAPTIST CHURCH OF HOLLY WOOD, INC.

Principal Place of Business

Mailing Address

2254 DOUGLAS ST.
HOLLYWOOD FL 33020

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HOLLYWOOD FL 33020

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **04/06/1984** 3a. Date of Last Report **09/26/1994**

4. FEI Number **59-2405072** Applied For Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

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

10. Name and Address of New Registered Agent

**MCCRAY, JAKE
742 S.W. 4TH ST.
DANIA FL 33004**

01 Name

02 Street Address (P.O. Box Number is Not Acceptable)

03

04 City

FL

05 Zip Code

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, 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 **PD**
NAME **MCCRAY, JAKE**
STREET ADDRESS **742 S.W. 4TH ST.**
CITY - ST - ZIP **DANIA FL 33004**

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE **VT**
NAME **PERRY, BOB**
STREET ADDRESS **3601 N.W. 44 AVE.**
CITY - ST - ZIP **FT. LAUDERDALE FL 33319**

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE **S**
NAME **FEDD, ANN**
STREET ADDRESS **161 N. 13TH AVE.**
CITY - ST - ZIP **DANIA FL 33004**

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE **D**
NAME **PARRISH, JERMOE**
STREET ADDRESS **5734 FLAGLER ST.**
CITY - ST - ZIP **HOLLYWOOD FL 33023**

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE **D**
NAME **WILLIAMS, OPHELIA**
STREET ADDRESS **2350 DOUGLAS ST.**
CITY - ST - ZIP **HOLLYWOOD FL 33020**

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE **C**
NAME **SMITH, EDDIE**
STREET ADDRESS **725 S.W. 2ND AVENUE**
CITY - ST - ZIP **DANIA FL 33004**

6.1 TITLE Change 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 110.07(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:

JAKE MCCRAY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26-19-95
Date Daytime Phone #