


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 09, 2006 8:00 am**  
**Secretary of State**

01-19-2006 90103 028 \*\*\*\*70.00

**DOCUMENT # N0400008808**

1. Entity Name  
**SOURCE OF GRACE BAPTIST CHURCH, INC.**




Principal Place of Business  
**12825 NE 2ND AVENUE  
 MIAMI, FL 33138**

Mailing Address  
**12825 NE 2ND AVENUE  
 MIAMI, FL 33138**

2. Principal Place of Business  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

3. Mailing Address  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country



03062006 Chg-NP CR2E037 (11/05)

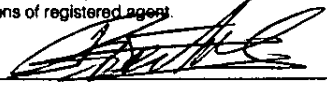
4. FEI Number  
**20-0122749** Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent  
**FERTIL, RICOT REV.  
 12825 NE 2ND AVENUE  
 MIAMI, FL 33138**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** 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  **3/6/06**  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

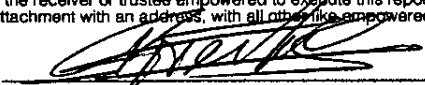
**Filing Fee is \$61.25 Due by May 1, 2006**

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

**Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FERTIL, RICOT BR. 12825 NE 2ND AVENUE MIAMI, FL 33138 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Pierre B MARC BR. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 12605 NW 10th Ave MIAMI, FL 33168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FERTIL, LORSINSKA SR. 12825 NE 2ND AVENUE MIAMI, FL 33138 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CHARLES Jean <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 14635 N E 5th Ave Miami, FL 33161
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD EDOUARD, MIREILLE SR. 1301 NE 154TH STREET MIAMI, FL 33162 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEXINE BERTHONY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2830 NW 132 St MIAMI, FL 33054
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SR. JUDITH PETIT FRERE 13251 MEMORIAL HWY #14 MIAMI, FL 33161 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SE Pierre EMMA <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 12605 NW 10th Ave MIAMI, FL 33168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ALEXANDRE, ROCHENEL BR. 675 NE 143 STREET FORT LAUDERDALE, FL 33161 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FERTIL, LORSINSKA SR. 12825 NE 2ND AVENUE MIAMI, FL 33138 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition


12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **3/6/06**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

1/19/2006-90103-028-\$70.00-\$70.00

**DOCUMENT # N04000008808**  
 1. Entity Name  
**SOURCE OF GRACE BAPTIST CHURCH, INC.**



Principal Place of Business  
 12825 NE 2ND AVENUE  
 MIAMI, FL 33138

Mailing Address  
 12825 NE 2ND AVENUE  
 MIAMI, FL 33138

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State  
 City & State

Zip Country  
 Zip Country

01122006 Chg-NP CRZE037 (11/05)

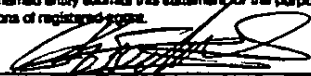
4. FEI Number  
 20-0122749

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

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**FERTIL, RICOT REV.**  
 12825 NE 2ND AVENUE  
 MIAMI, FL 33138

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City FL 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 

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

Filing Fee to \$64.25 Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fee

Makes check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FD FERTIL, RICOT BR. 12825 NE 2ND AVENUE MIAMI, FL 33138 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Pierre MARC, Br. 12605 NW 10th Ave MIAMI, FL 33168 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FERTIL, LORSINSKA SR. 12825 NE 2ND AVENUE MIAMI, FL 33138 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Charles JEAN 14635 NE 5th Ave. MIAMI, FL 33161 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD EDOUARD, MIREILLE SR. 1301 NE 154TH STREET MIAMI, FL 33182 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Pierre Emma 12605 NW 10th Ave. MIAMI, FL 33168 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SR. JUDITH PETTY FRERE 13251 MEMORIAL HWY #14 MIAMI, FL 33181 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lexine Berthony 2830 NW 132 St. MIAMI, FL 33054 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ALEXANDRE, ROCHENEL BR. 675 NE 143 STREET FORT LAUDERDALE, FL 33181 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Florida 119 or Florida 118.

ATTACHMENT  
 66004260





ATTACHMENT  
ATTACHMENT

66004260

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 20, 2006

SOURCE OF GRACE BAPTIST CHURCH, INC.  
12825 NE 2ND AVENUE  
MIAMI, FL 33138

Subject: SOURCE OF GRACE BAPTIST CHURCH, INC.

Reference Number: NO4000008808

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$70.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/JD

ANNUAL REPORTS SECTION



ATTACHMENT

66004260

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 25, 2006

SOURCE OF GRACE BAPTIST CHURCH, INC.  
12825 NE 2ND AVENUE  
MIAMI, FL 33138

Subject: SOURCE OF GRACE BAPTIST CHURCH, INC.

Reference Number: N04000008808

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If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

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/rm

ANNUAL REPORTS SECTION

P.O. BOX 6327 - Tallahassee, Florida 32314