## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N25776

FILED Jan 22, 2007 Secretary of State

Entity Name: GETHSEMANE MISSIONARY BAPTIST CHURCH, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2409 NW 79TH STREET MIAMI, FL 33147 **Current Mailing Address: New Mailing Address:** 2409 NW 79TH STREET MIAMI, FL 33147 FEI Number: 59-0884031 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: EDWARDS, T.J. 2409 N.W. 79TH ST. MIAMI, FL 33149 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition EDWARD, T.J., Name: Name: 9968 NW 25TH AVE. Address: Address: City-St-Zip: MIAMI, FL City-St-Zip: Title: CD () Delete Title: CD (X) Change ( ) Addition Name: EDWARDS, EZCHIEL Name: EDWARDS, EZEKIEL Address: 905 NW 123RD STREET Address: 905 NW 123RD STREET City-St-Zip: MIAMI, FL 33142 City-St-Zip: MIAMI, FL 33142 Title: () Delete Title: () Change () Addition WASHINGTON, OSIE Name: Name: Address: 1670 N.W. 85 ST Address: City-St-Zip: MIAMI, FL City-St-Zip: Title: Title: () Change () Addition ( ) Delete Name: KITTLES, RUBY Name: Address: 5501 N.W. 175 ST. Address: City-St-Zip: OPA LOCKA, FL City-St-Zip: Title: () Delete Title: () Change () Addition GRIFFIN, ZELMA Name: Name: 3169 NW 44 ST Address: Address: City-St-Zip: MIAMI, FL 33142 City-St-Zip: Title: () Delete Title: () Change () Addition WILLIAMS, LASHAWN Name: Name: Address: 905 NW 123RD STREET Address: MIAMI, FL 33168 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: T.J.EDWARDS PD 01/22/2007