2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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1. Entity Name
GREATER LOVE MISSIONARY BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
18200 N.W. 22 AVE. OPA LOCKA, FL 33056 US	POST OFFICE BOX 693661 MIAMI, FL 33269 US

03282006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0828166 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RICHARDSON, DWAYNE A 4942 SW 167 AVENUE MIRAMAR, FL 33027	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	D BANKS, YOLANDA 11631 SW 2 STREET, #201 PEMBROKE PINES, FL 33025	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Richardson, Iris 1501 N.W. 131 Street Miami, Fl 33151	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RICHARDSON, DWAYNE A 4942 SW 167 AVENUE MIRMAR, FL 33027	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JONES, LESTER A 2251 NW 192ND TERRACE MIAMI GARDENS, FL 33056	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Lakisha White 871 NE 209th terr. Miami, Fl 33179	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCARTHUR, CYRUS 19330 NW 4TH AVENUE MIAMI, FL 33169	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Melody Black 1131 NW 184th Dr. Miami, Fl 33169	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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: Lakisha White 4/28/06 (305)474-8118
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #