2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2002 8:00 AM
Secretary of State

DOCUMENT# N98000004000

Entity Name: MT. TEMPLE MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

2356 N.W. 67 STREET
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

2356 N.W. 67 STREET
MIAMI, FL 33147

New Mailing Address:

FEI Number: 65-0847383 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STATON, ANGELA
17710 NW 14 AVE
MIAMI, FL 33169 US

Name and Address of New Registered Agent:

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:

Title: DCD ( ) Delete
Name: DANIELS, SAMMY T
Address: 1742 NW 51 TERR
City-St-Zip: MIAMI, FL 33142

Title: DCT ( ) Delete
Name: SINGLETON, EDWARD
Address: 1721 NW 91 ST
City-St-Zip: MIAMI, FL 33147

Title: TCB ( ) Delete
Name: BACON, KELVIN
Address: 14800 NW 3 AVE
City-St-Zip: MIAMI, FL 33162

Title: TS ( ) Delete
Name: STATON, ANGELA M
Address: 17710 NW 14 AVE
City-St-Zip: MIAMI, FL 33169

Title: DP ( ) Delete
Name: MCCRAE, WILLIE REV
Address: 19801 NW 5 AVE
City-St-Zip: MIAMI, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SAMMY T. DANIELS DCD 04/16/2002

Electronic Signature of Signing Officer or Director — Date