2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004000

City-St-Zip:

MIAMI, FL 33169

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

FILED Apr 21, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2356 N.W. 67 STREET MIAMI, FL 33147 **Current Mailing Address: New Mailing Address:** 2356 N.W. 67 STREET MIAMI, FL 33147 FEI Number: 65-0847383 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STATON, ANGELA 17710 NW 14 AVE MIAMI, FL 33169 US 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: DCD () Change () Addition () Delete DANIELS, SAMMY T Name: Name: 1742 NW 51 TERR Address: Address: City-St-Zip: MIAMI, FL 33142 City-St-Zip: Title: DCT () Delete Title: (X) Change () Addition Name: SINGLETON, EDWARD Name: ROBERTS, GARRETT C JR Address: 1721 NW 91 ST Address: 4123 NW 181 TERRACE City-St-Zip: MIAMI, FL 33147 City-St-Zip: MIAMI, FL 33056 Title: TCB () Delete Title: () Change () Addition BACON, KELVIN Name: Name: 14800 NW 3 AVE Address: Address: City-St-Zip: MIAMI, FL 33162 City-St-Zip: Title: TS () Delete Title: TS (X) Change () Addition STATON, ANGELA M Name: Name: TOOD, SABRINA D 17710 NW 14 AVE 755 NW 178 TERR Address: Address: City-St-Zip: MIAMI, FL 33169 City-St-Zip: MIAMI, FL 33169 Title: DΡ () Delete Title: (X) Change () Addition MCCRAE, WILLIE REV STATON, BERNARD ELDER Name: Name: 19801 NW 5 AVE 17710 NW 14 AVENUE Address: Address:

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.

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MIAMI, FL 33169

SIGNATURE: SAMMY T. DANIELS DCD 04/21/2004