

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004000

FILED  
Jan 24, 2008  
Secretary of State

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:**

MT.TEMPLE MB CHURCH  
P O BOX 472711  
MIAMI, FL 33247

FEI Number: 65-0847383

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

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

Title: DCT ( ) Delete  
Name: ROBERTS, GARRETT C JR  
Address: 4123 NW 181 TERRACE  
City-St-Zip: MIAMI, FL 33056

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

Title: TS ( ) Delete  
Name: TOOD, SABRINA D  
Address: 755 NW 178 TERR  
City-St-Zip: MIAMI, FL 33169

Title: DCP ( ) Delete  
Name: STATON, BERNARD PASTOR  
Address: 17710 NW 14 AVENUE  
City-St-Zip: MIAMI, FL 33169

Title: DCT ( ) Delete  
Name: MILLER-COLEY, JENNIE  
Address: 2356 NW 67 ST  
City-St-Zip: MIAMI, FL 33147

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: DCT (X) Change ( ) Addition  
Name: ROBERTS, GARRETT C JR.  
Address: 17710 N W 14TH AVE  
City-St-Zip: MIAMI, FL 33169

Title: TCB (X) Change ( ) Addition  
Name: BACON, KELVIN  
Address: 1736 NW 56 ST  
City-St-Zip: MIAMI, FL 33142

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 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: SAMMY T. DANIELS,SR

DCT

01/24/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date