



**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # 728563</b> 1. Entity Name <b>NEW SHILOH MISSIONARY BAPTIST CHURCH, INC.</b>	
---	---

Principal Place of Business <b>1350 N.W. 95TH STREET MIAMI, FL 33147</b>	Mailing Address <b>1350 N.W. 95TH STREET MIAMI, FL 33147</b>
---	---

<b>DO NOT WRITE IN THIS SPACE</b>
-----------------------------------

	
04242007 No Chg-NP CR2E037 (4/06)	
4. FEI Number <b>59-0658731</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent  <b>BARRY BOREN, ESQ 9200 S DADELAND BLVD 412 MIAMI, FL 33156</b>
---

<b>DO NOT WRITE IN THIS SPACE</b>
---------------------------------------

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
---	--	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD POWELL, D.L. REV 1350 N.W. 95TH STREET MIAMI, FL 33147
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DAVIS, FRANCES 5525 NW 9 AVE MIAMI, FL 33127
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ROUNDTREE, CLARA 1358 N.W. MIAMI, FL 33147
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LOVETT, BRENDA 6711 N.W. 29TH AVE. MIAMI, FL 33147
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ALEXANDER, MAXINE 3525 NW 213 ST OPA LOCKA, FL 33056
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<b>DO NOT WRITE IN THIS SPACE</b>
---------------------------------------

U00000748192  
05/17/07-80055-022 70.00

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: Brenda Lovett Brenda Lovett 4/24/07 (305) 835-8280  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #