


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

**FILED**  
**May 02, 2007 8:00 am**  
**Secretary of State**

05-02-2007 90068 041 \*\*\*\*61.25

<b>DOCUMENT # 700930</b>					
1. Entity Name <b>ANTIOCH MISSIONARY BAPTIST CHURCH OF BROWNSVILLE - MIAMI, FLORIDA, INCORPORATED</b>					
Principal Place of Business <b>2799 NORTHWEST 46TH STREET MIAMI, FL 33142</b>		Mailing Address <b>ANTIOCH M.B. CHURCH P.O. BOX 471016 MIAMI, FL 33247</b>			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	04292007 Chg-NP CR2E037 (12/06)	
4. FEI Number <b>05-0038782</b>			Applied For 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			7. Name and Address of New Registered Agent		
<b>WALDEN, ANDY 3130 NORTHWEST 67TH STREET MIAMI, FL 33147</b>			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>					
<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>	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D	<input type="checkbox"/> Delete	TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MACK JACKSON		NAME	Larrie M. Lovett, II	
STREET ADDRESS	4900 N.W. 33 AVE		STREET ADDRESS	2799 NW 46th	
CITY-STATE-ZIP	MIAMI, FL		CITY-STATE-ZIP	Miami, FL 33142	
TITLE	SD	<input type="checkbox"/> Delete	TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WALDEN, ANDY		NAME	Walter Peyton	
STREET ADDRESS	3130 N.W. 67TH STREET		STREET ADDRESS	765 NW 179 St	
CITY-STATE-ZIP	MIAMI, FL		CITY-STATE-ZIP	Miami, FL 33169	
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOODY, RONALD		NAME		
STREET ADDRESS	8745 N.W. 23RD AVENUE		STREET ADDRESS		
CITY-STATE-ZIP	MIAMI, FL		CITY-STATE-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COWART, JESSE		NAME		
STREET ADDRESS	1372 NW 56TH ST		STREET ADDRESS		
CITY-STATE-ZIP	MIAMI, FL		CITY-STATE-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MELTON, S.W.		NAME		
STREET ADDRESS	2914 N.W. 57TH STREET		STREET ADDRESS		
CITY-STATE-ZIP	MIAMI, FL		CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-STATE-ZIP			CITY-STATE-ZIP		
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: <i>Andy Walden</i>			Date: <i>4-29-07</i> Daytime Phone #: <i>305-696-8044</i>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		