

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 23, 2008 8:00 am
Secretary of State

05-23-2008 90019 020 ****61.25

DOCUMENT # 700930

1. Entity Name
**ANTIOCH MISSIONARY BAPTIST CHURCH OF
BROWNSVILLE - MIAMI, FLORIDA, INCORPORATED**



Principal Place of Business
**2799 NORTHWEST 46TH STREET
MIAMI, FL 33142**

Mailing Address
**ANTIOCH M.B. CHURCH
P.O. BOX 471016
MIAMI, FL 33247**

40104581



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04302008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
05-0038782

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WALDEN, ANDY
3130 NORTHWEST 67TH STREET
MIAMI, FL 33147**

Name
WALTER PRESTON
Street Address (P.O. Box Number is Not Acceptable)
765 NW 177TH TERR.

City
MIAMI FL Zip Code
33169

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

Walter Preston

Walter Preston, Vice President 04/27/08

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	MACK JACKSON	
STREET ADDRESS	4900 N.W. 33 AVE	
CITY-ST-ZIP	MIAMI, FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	WALDEN, ANDY	
STREET ADDRESS	3130 N.W. 67TH STREET	
CITY-ST-ZIP	MIAMI, FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	MOODY, RONALD	
STREET ADDRESS	8745 N.W. 23RD AVENUE	
CITY-ST-ZIP	MIAMI, FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	COWART, JESSE	
STREET ADDRESS	1372 NW 56TH ST	
CITY-ST-ZIP	MIAMI, FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MELTON, S.W.	
STREET ADDRESS	2914 N.W. 57TH STREET	
CITY-ST-ZIP	MIAMI, FL	
TITLE	P	<input type="checkbox"/> Delete
NAME	LOVETT, II, LARRIE M	
STREET ADDRESS	2799 NW 46 ST	
CITY-ST-ZIP	MIAMI, FL 33142	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WALTER PRESTON	
STREET ADDRESS	765 NW 177TH TERR	
CITY-ST-ZIP	MIAMI, FL 33169	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CAROLYN MARTIN	
STREET ADDRESS	2110 NW 81ST TERR	
CITY-ST-ZIP	MIAMI, FL 33147	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-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:

Walter Preston

Walter Preston, vice President

04/27/08

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #