

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Murpham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 701200 (8)

1. Corporation Name

SWEETFIELD BAPTIST CHURCH INCORPORATED, OF MIAMI
DADE COUNTY, FLORIDA

Principal Place of Business

Mailing Address

3585 PLAZA STREET
MIAMI FL 33133
US

3585 PLAZA STREET
MIAMI FL 33133

APR 27 1995
FILED
\$5 MAY - 11 9:14
TALLAHASSEE, FLORIDA
200001500982
-05/30/95-01023--002
*****77.50 *****77.50
DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/15/1960
3a. Date of Last Report 04/22/1994

4. FEI Number 05-0184000
Applied For Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt #, etc	Suite, Apt #, etc
22	27
City & State	City & State
23	28
Zip	Country
24	25
Country	Zip
29	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JONES, VIOLA R.
3512 WILLIAMS AVENUE
MIAMI FL 33133

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City
FL
05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

NOTE: Registered Agent signature required when substituting

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	V
NAME	NELMS, ODIS
STREET ADDRESS	3071 HIBISCUS ST.
CITY-ST-ZIP	MIAMI FL DECEASED
TITLE	S
NAME	BEMBRY, ODESSA
STREET ADDRESS	3171 McDONALD ST.
CITY-ST-ZIP	MIAMI FL 33133
TITLE	S
NAME	BALLARD, TERRI V.
STREET ADDRESS	6104 S.W. 68TH ST.
CITY-ST-ZIP	MIAMI FL 33143
TITLE	D
NAME	SMITH, HUGH
STREET ADDRESS	3850 FROW AVENUE
CITY-ST-ZIP	MIAMI FL
TITLE	D
NAME	MCFADDEN, EARNEST
STREET ADDRESS	6250 SW 58TH PLACE
CITY-ST-ZIP	SOUTH MIAMI FL
TITLE	D
NAME	JONES, VIOLA
STREET ADDRESS	3512 WILLIAMS AVE.
CITY-ST-ZIP	MIAMI FL 33133

11 TITLE	VICE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	Emmanuel Parker	
13 STREET ADDRESS	3330 FROW Ave	
14 CITY-ST-ZIP	Miami, FLA. 33133	
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Viola R. Jones*
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

April 27, 1995 4419352
9352
2W