FILE NOW: FILING FEE IS \$61.25 NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CAPORALIONS

1998 POCUMENT #

701200

(8)

SWEETFIELD BAPTIST CHURCH INCORPORATED, OF MIAMI , DADE COUNTY, FLORIDA

, DADE COUNTY, FLORIDA				1	
Principal Place of Business 3585 PLAZA STREET MIAMI FL 33133 US		Mailing Address 3585 PLAZA STREET MIAMI FL 33133 US		I TODANI IDOM BANDI NIQUO NIQAN BANN DON ONDI	1 010[1 010]6 010] 010]1 014]1 014]1 100]
				3. Date Incorporated or Qualified 07/15/1960 4. FEI Number Applied For	
				05-0184000	Applied For Not Applicable
2. Principal F	Place of Business	2a. Mailing Address			\$8.75 Additional
21		26		5. Certificate of Status Desired	Fee Required
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be
City & Stat	to	City & State		Trust Fund Contribution	Added to Fees
23	···	28		7. Is this nonprofit corporation a homeow	Mers association?
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24	25		30	Personal Property Tax due June 30.	Yes Mo
	9. Name and Address of Curre	nt Registered Agent	B1 Name	10. Name and Address of New Register	ed Agent
5 124444	0484		ł I	EARNEST FADDEN	
BYNUM, CORA			82 Street A	address (P.O. Box Number is Not Acceptable)	•
10902 S.W. 162 STREET MIAMI FL 33157		83	230 Sept 90 FIACE		
(AIN-VAI)	L WIN		94 Oh.		ler 75 Code
			· 84 City 人	• • • • • • • • • • • • • • • • • • • •	L 85 Zip Code 33/43
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Statute	s, the above-named outhorized by the corpo	corporation submits this statement for the purpos oration's board of directors. I hereby accept the	e of changing its registered
agent. I a	am familiar with, and accept the ubig		rida Styllytes.		mach
SIGNATURE	Signature, typed or printed name of registered ag	rum / Ex	Robistored Agent Agranus r	codired when rehestalings	<i>20198</i>
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	D	Change Addition
NAME	JOHNSON, MAZERINE		1.2 NAME	ANNIE BELL HALL	• •
STREET ADDRESS	3281 NW 214 ST.			3848 ElizBet HST.	
CITY-ST-ZIP	OPA LOCKA FL 33056	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	MIAMI, FLA 33/33	Change Addition
TITLE NAME	D CURRY, DAISY	וייין סנוננוג	2.2 NAME		C change C Addition
STREET ADDRESS	1400 NW 116 STREET		2.3 STREET ADDRESS		
CITY-\$T-ZIP	MIAMI FL 33167		2. 4 City-St-ZiP		
TITLE	T	DELETE	0.4.7(7).5	Faren	Change Addition
NAME	BEMBRY, OCESSA		3.2 NAME	EMANUEL PARKER	
STREET ADDRESS	\$100 NEW YORK ST.		3.3 STREET ADDRESS	21935 S.W. 109 A VE minmy, Fc. 33170	
CITY-ST-ZIP	MIAMI FL 33133			m 12m1, FC. 33110	Channe C Addition
TITLE	S TENDI	☐ DELETE	4.1 Title		Change Addition
NAME Street address	VICKERS, TERRI 6100 S.W. 68TH STREET		4. 2 NAME 4.3 STREFT ADDRESS		•
CITY-ST-ZIP	MIAMI FL 33143		4.4 CITY-ST-ZIP		
TITLE	VP	DELETE		IP word Elizie	Charge Addition
NAME	MCFADDEN, ERNEST		5.2 NAME	JACKSON ELZÍE 3001 N.W. 55 ST.	$\mathcal{A}(\mathcal{A})$
STREET ADDRESS	6250 S.W. 58TH PLACE		5.3 STREET ADDRESS	min m1, Fun 33/42	110/1/2
CITY-ST-ZIP	MIAMI FL 33143		5.4 CITY-ST-ZIP	33/42	10400
TITLE	D	☐ DELETE	6.1 TITLE		Change Addition
NAME	JONES, VIOLA		6.2 NAME		
STREET ADDRESS	3512 WILLIAMS		6.3 STREET ADDRESS	•	Non \$1,20

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 changer, or on an attachment with an ardress.

CICNATURE:

FILED

Jun 26 1998 8:00am

Secretary of State