


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008 08:00 A
Secretary of State

DOCUMENT # 701200 1. Entity Name SWEETFIELD BAPTIST CHURCH INCORPORATED, OF MIAMI, DADE COUNTY, FLORIDA	
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Principal Place of Business 3585 PLAZA STREET MIAMI, FL 33133 US	Mailing Address 3585 PLAZA STREET MIAMI, FL 33133 US
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DO NOT WRITE IN THIS SPACE



03312008 No Chg-NP CR2E037 (4/06)

4. FEI Number 05-0184000	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FALCO, JULIA F
 3421 FLORIDA AVENUE
 MIAMI, FL 33133

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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: *Julia F. Falco* 4/13/08

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

U00000902027
 04/29/08-80090-014 70.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, ALBERT 10805 SW 141 LANE MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STRINGER, MATTIE 11251 DOUGLAS RD MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ODESSA, BEMBRY 3100 NEW YORK STREET MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FALCO, JULIA F 3421 FLORIDA AVENUE MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VICKERS, JULIA 6104 SW 68 STREET MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COBBS, BETTY J 13933 MONROE ST MIAMI, FL 33136

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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: *Julia F. Falco* 4/14/08

SIGNATURE TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #