

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701757

FILED
Mar 03, 2009
Secretary of State

Entity Name: WESTVIEW BAPTIST CHURCH INC

Current Principal Place of Business:

13301 N. W. 24TH AVE.
MIAMI, FL 33167

New Principal Place of Business:

13301 N. W. 24TH AVENUE
MIAMI, FL 33167

Current Mailing Address:

PO BOX 680879
NORTH MIAMI, FL 33168

New Mailing Address:

13301 NW 24TH AVENUE
MIAMI, FL 33167

FEI Number: 36-4527249

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LENOIR, ANTWANE
13301 N. W. 24TH AVE.
MIAMI, FL 33167 US

Name and Address of New Registered Agent:

LENOIR, ANTWANE REV.
13301 N. W. 24TH AVE.
MIAMI, FL 33167 US

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.

SIGNATURE: ANTWANE D. LENOIR

03/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PDRA () Delete
Name: ROLLINS, DOROTHY
Address: 2200 N. W. 133 STREET
City-St-Zip: MIAMI, FL 33167

Title: SD () Delete
Name: REID, MAIZELYN
Address: 2100 N. W. 126 ST.
City-St-Zip: MIAMI, FL 33167

Title: VPD () Delete
Name: JONES, SYLVIA
Address: 20760 N. W. 41 AVE. RD.
City-St-Zip: MIAMI, FL 33055

Title: TD () Delete
Name: SLAPPEY, SUSIE
Address: 3200 N.W. 171 ST.
City-St-Zip: MIAMI, FL 33056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: LENOIR, ANTWANE REV.
Address: 13301 N. W. 24 AVENUE
City-St-Zip: MIAMI, FL 33167

Title: D (X) Change () Addition
Name: LENOIR, PATRICIA
Address: 13301 NW 24 AVENUE
City-St-Zip: MIAMI, FL 33167

Title: S (X) Change () Addition
Name: JONES, SYLVIA
Address: 13301 NW 24 AVENUE
City-St-Zip: MIAMI, FL 33167

Title: T (X) Change () Addition
Name: SLAPPEY, SUSIE
Address: 13301 NW 24 AVENUE
City-St-Zip: MIAMI, FL 33167

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTWANE D. LENOIR

PCEO

03/03/2009

Electronic Signature of Signing Officer or Director

Date