2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mailing Address

DOCUMENT # 701970

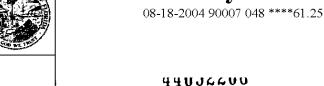
1. Entity Name

Principal Place of Business

CHOSEN MISSIONARY BAPTIST CHURCH INC



FILED Aug 18, 2004 8:00 am Secretary of State



1641 NW AV P O BOX 17 BELLE GLAI		POE	1641 NW AVE G P O BOX 174 BELLE GLADE FL 33430				44032200				
2. Principal P	lace of Business	3. Mail	3. Mailing Address								
Suite, Apt.	#, etc.	Su	Suite, Apt. #, etc.				N	OORE	CR2E03	7 (4/04)	
City & Stat	e	Cit	City & State				4. FEI Number	59-1846826		<u> </u>	olied For Applicable
Zip	Country	Zip	Zip		Country		5. Certificate of Status Desired S8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent							7. Name and Ad	dress of New Re	gistered A	ent	
					Name						
JONES, SANFORD T. 908 NE 30 ST. BELLE GLADE FL 33430					Street Address (P.O. Box Number is Not Acceptable)						
, -		·			City				FL	Zip Code	
	named entity submits thi ions of registered agent.	s statement for the purp	ose of changing its r	registere	ed office or	register	ed agent, or both, i	n the State of Flo	rida. I am fa	miliar with,	and accept
SIGNATURE	Signature, typed or printed name	of registered agent and bile if app	nicable. (NOTE:	: Registered	d Agent signatur	e required	when reinstating)		DATE		
FILE NOW: FEE IS \$61.25 Due By September 8, 2004 9. Election Campaign Trust Fund Contribu] ,	\$5.00 May Be Added to Fees	Florid	ke Check la Departi	ment of S	tate
10.		CERS AND DIRECTORS		11.			ADDITIONS/CHAN	GES TO OFFICER	RS AND DIR	ECTORS IN	10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JONES, SANFORD T. 908 NE 30 ST. BELLE GLADE FL		☐ Delete			~				Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BROOKS, LURLINE, 1505 N.W. AVE. G BELLE GLADE FL		Delete					8 c		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEIERSDORFER, JAM 1508 1/2 NW12 ST. BELLA GLADE FL	ES	Delete		- [-		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAWSON, CURTIS 600 NW AVENUE G BELLE GLADE FL		☐ Delete							☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAYNOR, JOHN H 1143 NE 25TH ST BELLE GLADE FL 334	430	☐ Delete	TITLE NAMI STRE	:					Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURRUS, THOMAS 1277 STILLWELL RD BELLE GLADE FL 334		□ Delete	CITY-	E Et address -st-zip					☐ Change	Addition
12. I hereby indicated	certify that the information to this report or supplier	supplied with this filing	does not qualify for accurate and that m	the exer	mption state	ed in Se	ection 119.07(3)(i), I	Florida Statutes, I	further certi	fy that the in	formation or director

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under oath; that it am an officer of 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: 2 RINTED NAME OF SIGNING OFFICER OR DIRECTOR