

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705038

FILED
May 21, 2004
Secretary of State**Entity Name:** BAPTIST RETIREMENT CENTER OF MIAMI INC**Current Principal Place of Business:**7855 S W 104TH STREET
MIAMI, FL 33156 US**New Principal Place of Business:****Current Mailing Address:**7855 SW 104TH STREET
MIAMI, FL 33156 US**New Mailing Address:****FEI Number:** 59-1197144 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**CLEELAND, DAVID
7855 SW 104TH STREET
SUITE 2120
MIAMI, FL 33156 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: RANSOM, PERCY
Address: 21515 NW 28TH AVE
City-St-Zip: OPA LOCKA, FL**Title:** D () Delete
Name: LEDBETTER, TOM
Address: 1265 NE 199TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL**Title:** D (X) Delete
Name: CARVAJAL, REINALDO
Address: 14518 SW 98TH TERRACE
City-St-Zip: MIAMI, FL**Title:** SD () Delete
Name: VAN TASSEL, MASON H
Address: 7855 SW 104TH STREET STE 210
City-St-Zip: MIAMI, FL 33156**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: JULIEN, RONEL
Address: 15395 N MIAMI AVE
City-St-Zip: NORTH MIAMI, FL 33169**Title:** TD (X) Change () Addition
Name: RAY, STEVEN
Address: 6500 SW 97 AVE
City-St-Zip: MIAMI, FL 33173**Title:** () Change () Addition
Name: () Change () Addition
Address: () Change () Addition
City-St-Zip: () Change () Addition**Title:** () Change () Addition
Name: () Change () Addition
Address: () Change () Addition
City-St-Zip: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MASON H VAN TASSEL

SD

05/21/2004

Electronic Signature of Signing Officer or Director

Date