


FILED
Mar 03, 1999 8:00 am
Secretary of State

03-03-1999 90013 048 ****70.20

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 705548
 1. Corporation Name
SHILOH MISSIONARY BAPTIST CHURCH, INC.

Principal Place of Business 893 NW 28TH AVE FT LAUDERDALE FL 33311	Mailing Address 893 NW 28TH AVE FT LAUDERDALE FL 33311
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21 Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 05/02/1963
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	4. FEI Number 59-1708801
23 City & State	28 City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
24 Zip	29 Country	30 Zip
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent PERMENTER, IDA A 2344 N.W. 13TH COURT FT. LAUDERDALE FL 33311	10. Name and Address of New Registered Agent 81 Name BARNES, CHARLES 82 Street Address (P.O. Box Number is Not Acceptable) 1029 N.W. 10TH AVE. 83 84 City FT. LAUDERDALE FL 85 Zip Code 33311
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *Charles E. Barnes* DATE: **4/7/99**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PERMENTER, IDA M	1.2 NAME	<i>Henry Bacon Jr.</i>
STREET ADDRESS	2344 N.W. 13TH COURT	1.3 STREET ADDRESS	3354 N.W. 17th Ct.
CITY-ST-ZIP	FT. LAUDERDALE, FL	1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33311
TITLE	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SMITH, CLARA	2.2 NAME	TAYLOR, SHARON
STREET ADDRESS	1709 N.W. 8TH COURT, #2	2.3 STREET ADDRESS	841 S.W. 39 Ave
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33312
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BARNES, CHARLES	3.2 NAME	HENRY BACON JR
STREET ADDRESS	1029 N.W. 10TH AVENUE	3.3 STREET ADDRESS	3354 N.W. 17th Ct
CITY-ST-ZIP	FT LAUDERDALE FL	3.4 CITY-ST-ZIP	FT. LAUD. FL 33311
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	SHARON TAYLOR
STREET ADDRESS		4.3 STREET ADDRESS	841 SW 39 Ave
CITY-ST-ZIP		4.4 CITY-ST-ZIP	FT. LAUD. FL 33312
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Charles E. Barnes* DATE: **2-16-99** DAYTIME PHONE: **954-763-2319**

CR2E037 (1/98)