

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Mar 14, 2007 8:00 am
Secretary of State

03-14-2007 90044 016 ****61.25



DOCUMENT # 705548
1. Entity Name
SHILOH MISSIONARY BAPTIST CHURCH, INC.

Principal Place of Business Mailing Address
893 NW 28TH AVE. P. O. BOX 8571
FORT LAUDERDALE FL 33311 FORT LAUDERDALE FL 33310



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State

1st MOORE CR2E037 (10/06)

Zip Country Zip Country

4. FEI Number Applied For
59-1708801 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
~~CARR, ALMA
4291 NW 19TH ST
SUITE 3
LAUDERHILL FL 33313~~

7. Name and Address of New Registered Agent
Name **CHARLES E. BARNES**
Street Address (P.O. Box Number is Not Acceptable)
1031 N.W. 10 TER
City **FT. Lauderdale FL** Zip Code **33311**

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 **CHARLES E. BARNES President** *Charles E Barnes* 3-4-07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PERMENTES, IDA 2344 NW 13TH STREET FORT LAUDERDALE FL 33312	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CARR, ALMA 4291 NW 19TH STREET, #3 LAUDERHILL FL 33313	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDT BARNES, CHARLES 1031 NW 10TH TERR FORT LAUDERDALE FL 33311	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TAYLOR-ROCKETT, DAPHNE 3388 NW 22ND STREET LAUDERDALE LAKES FL 33311	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT JENKINS, SANDRA 940 NW 33RD WAY FORT LAUDERDALE FL 33311	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SMITH, CHARLES 1604 NW 11TH COURT FORT LAUDERDALE FL 33311	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Charles E Barnes* 3-4-07 954-363-2491