

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706494

FILED
Apr 14, 2004
Secretary of State

Entity Name: SOUTH MIAMI HEIGHTS BAPTIST CHURCH, INC.

Current Principal Place of Business:

11295 QUAIL ROOST DRIVE
MIAMI, FL 331576542 US

New Principal Place of Business:

Current Mailing Address:

11295 QUAIL ROOST DRIVE
MIAMI, FL 331576542 US

New Mailing Address:

FEI Number: 59-6032414 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ARCHIBALD, HENSON
9120 CARIBBEAN BLVD.
MIAMI, FL 33157 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: D () Delete
Name: CAREY, GLENN MR
Address: 12950 SW 191 STREET
City-St-Zip: MIAMI, FL 33177 US

Title: D () Delete
Name: BROWN JR., LLOYD MR
Address: 17331 S.W. 119 CT.
City-St-Zip: MIAMI, FL 331772216 US

Title: D () Delete
Name: THOMPSON, MONICA MS.
Address: 20613 SW 122 AVE
City-St-Zip: MIAMI, FL 33177 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: BARRETT, MICHELLE MRS.
Address: 26401 SW 149 PL
City-St-Zip: MIAMI, FL 33032 US

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: LLOYD BROWN JR.

D

04/14/2004

Electronic Signature of Signing Officer or Director

_____ Date