2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 05, 2007 8:00 am Secretary of State

DOCUMENT # 707422 1. Entity Name GRIFFIN ROAD BAPTIST CHURCH, INC.								02-05-20	•	4 037 ****7(0.00
Principal Place of Business 4650 SW 30TH AVE 4650 SW 30TH AVE FT LAUDERDALE, FL 33312 Railing Address 4650 SW 30TH AVE FT LAUDERDALE, FL 33312 FT LAUDERDALE, FL 33312									IW 1181 WIRT 8181	ıı öldir bedi ə ləti di g	, Mari en 1841
Principal Place of Business - No P.O. Box #											
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Suite, Apt. #, etc.			Suite, Apt. #, etc.				01262007	Chg-NP	CR2	E037 (12/06)	
City & State			City & State			4. FEI Number 65-1131			<u>_</u>	plied For at Applicable	
Zip Country		Zip Car		untry		5. Certificate o	of Status Desir	eđ 🗆	\$8.75 Add	litional	
	6. Name	and Address of Current	 Registered Agent				7. Name and /	Address of No	w Register	<u>·</u>	u
OKLIN ED	WARD				Name	Fd	ward	11/0/1	ick		
OKUN, EDWARD 6810 SW 57 STREET							(P.O. Box Number is Not Acceptable) 7 Sw 210 Avenve				
DAVIE, FL 33314						<u> </u>	anderd	ale F	_	- 3312	
		_			City	7.6	auurra	<i>are</i> , ,	<u>/</u>	Zip Code	е
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trie obligat	iloris opegis	nered agent.								~ ~ .	
SIGNATURE SURVEY () Alliel 1-28-07											
	Signature, typed	d or printed name of registered agent a	and title if applicable. (NO)	E: Registerer	d Agent signati	are completed.	when rainetations)		DΔ	TE	
	_	ee is \$61.25 May 1, 2007	9. Election Ca Trust Fund	mpaign F Contributi	inancing		\$5.00 May Be Added to Fees		Florida De	eck payable to partment of St	tate
10.	Due by f	ee is \$61.25	9. Election Ca Trust Fund	mpaign F Contributi	inancing ion.		\$5.00 May Be Added to Fees		Florida De	DIRECTORS IN	tate
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 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 / / r

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-28-07/95486872