

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 707678

1. Entity Name
ROANOKE BAPTIST CHURCH INC



FILED
Jul 22, 2008 08:00 AM
Secretary of State

Principal Place of Business
**1320 DOUGLAS AVE
WEST PALM BEACH, FL 33401**

Mailing Address
**1060 W 2ND ST.
RIVIERA BCH., FL 33404**

DO NOT WRITE IN THIS SPACE



05182008 No Chg-NP CR2E037 (4/06)

4. FEI Number 14-1866419	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**MCDONALD, HERBERT
173 SUNFLOWER CIRCLE
ROYAL PALM BEACH, FL 33411**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$81.25
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000955746
07/22/08-80003-019 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	V MCKINNEY, WILLIE L 1060 W. 2ND STREET RIVIERA BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T TURNER, WILBERT 1447 8TH STREET WEST PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KERBO, JOHN 1134 WEST 23RD ST. RIVIERA BEACH, FL 33404
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D JESSIE COOKS 533 S MAGONIA CIR. W PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S MCDONALD, HERBERT 173 SUN FLOWER CIRCLE ROYAL PALM BEACH, FL 33411
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P JOHNSON, MAURICE REV 922.14TH STREET WEST PALM BEACH, FL 33401

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: *Herbert L. McDonald*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8 JUN 08 (561) 798-2808
Date Daytime Phone #