

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710723

FILED
Aug 23, 2004
Secretary of State

Entity Name: MOUNT CALVARY BAPTIST CHURCH OF MIAMI, INC.

Current Principal Place of Business:

1140 DR. MARTIN LUTHER KING, JR. BLVD.
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

1140 DR. MARTIN LUTHER KING, JR. BLVD.
MIAMI, FL 33150

New Mailing Address:

FEI Number: 59-2667113

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PITTS, CLINTON J ESQ.
4770 BISCAYNE BLVD.
SUITE 1200
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

ATCHISON, SAMUEL REV
1140 DR. MARTIN LUTHER KING JR BLVD
MIAMI, FL 33150 US

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: SAMUEL ATCHISON

08/23/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TP () Delete
Name: ATCHISON, SAMUEL REV
Address: 3313 SOUTH DOUGLAS ROAD
City-St-Zip: MIRAMAR, FL 33025

Title: TS () Delete
Name: WEST, JERALDINE
Address: 1727 NW 91ST STREET
City-St-Zip: MIAMI, FL 33147

Title: TT () Delete
Name: PITTS, CLINTON J
Address: 7005 CROWN GATE PLACE
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TT (X) Change () Addition
Name: MAYWEATHER, ELLIES
Address: 545 S BISCAYNE RIVER DRIVE
City-St-Zip: MIAMI, FL 33169

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: SAMUEL ATCHISON

TP

08/23/2004

Electronic Signature of Signing Officer or Director

Date