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FILED

Feb 13 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 712343 (3)

1. Corporation Name

CENTRAL BAPTIST CHURCH OF MIAMI, FLORIDA, (INCORPORATED)

Principal Place of Business

Mailing Address

500 NORTHEAST FIRST AVENUE
MIAMI FL 33132500 NORTHEAST FIRST AVENUE
MIAMI FL 33132-19163. Date Incorporated or Qualified
03/03/19673a. Date of Last Report
01/31/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

59-0651075

Applied For

Not Applicable

5. Certificate of Status Desired

☒\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CROCKETT, JERRY
4000 SOUTHEAST FINANCIAL CENTER
200 S BISCAYNE BLVD.
MIAMI FL 33131

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE SD ☐ DELETE
NAME MARTIN, FRAN C.
STREET ADDRESS 15095 S.W. 89TH AVE.
CITY - ST - ZIP MIAMI FL1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIPTITLE D ☐ DELETE
NAME BAXLEY, WILLIS A.
STREET ADDRESS 9755 S.W. 213 TERRACE
CITY - ST - ZIP MIAMI FL2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIPTITLE VD ☐ DELETE
NAME GRYDER, CHARLES
STREET ADDRESS 5660 PINETREE DR.
CITY - ST - ZIP MIAMI BCH FL3.1 TITLE ☒ Change ☐ Addition
3.2 NAME D
3.3 STREET ADDRESS GRYDER, CHARLES
3.4 CITY - ST - ZIP 5660 PINETREE DRI.
MIAMI BCH FLTITLE D ☐ DELETE
NAME CASSELL, BEN
STREET ADDRESS 1614 N.W. 29 CT.
CITY - ST - ZIP MIAMI FL4.1 TITLE ☒ Change ☐ Addition
4.2 NAME VD
4.3 STREET ADDRESS CASSELL, BEN
4.4 CITY - ST - ZIP 1614 N.W. 29 CT.
MIAMI, FLTITLE D ☐ DELETE
NAME ACTON, SUZANNE
STREET ADDRESS 8200 S.W. 99TH ST.
CITY - ST - ZIP MIAMI FL5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIPTITLE CD ☐ DELETE
NAME ACTON, DAVID
STREET ADDRESS 10421 SW 89 AVE.
CITY - ST - ZIP MIAMI FL6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/97

Date

379-4781

Daytime Phone # 0028819

CR2E037 (9/96)