SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

Aug 08 1997 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # ST. MARK MISSIONARY BAPTIST CHURCH. INC. Principal Place of Business Mailing Address 1470 NW 87TH ST 1470 NW 87TH ST MIAMI FL 33147 MIAMI FL 33147 DO NOT WRITE IN THIS SPACE 3a. Date of Last Report 3. Date incorporated or Qualified 03/17/1967 04/05/1996 2, Principal Place of Business Mailing Address 4. FEI Number Applied For 59-2085818 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country This corporation owes or has paid the current year Intangible Yes Yes Personal Property Tax due June 30. 29 30 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 <u>Henry W. Mack</u> ANDERSON, KEVIN A Address (P.O. Box Number is Not Acceptable)
0 S. W. 13th Street 82 **39 E 6TH ST** 83 HIALEAH FL 33010 84 City Plantation 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 sharps was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the appointment of Section 617.0503, Horida Statutes. SIGNATURE (NOTE: Registered Agent signature required whon reinstating) Signature, typed or printed name of rapid 12. OFFICERS AND DIRECTOR ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 1949 DELETE Change TITLE 1.1 TITLE COOPER, JOHNNIE W NAME 1.2 NAME 9354 NW 25TH AVE STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP X DELETE 2.1 T/T/F Change X Addition TITLE Freddie Raiford GILLARD, ISAAC NAME 2.2 NAME 1870 NW 167TH ST 8220 N. W. 12 Court STREET ADDRESS 2.3 STREET ADDRESS Miami, FL 33147 míami fl 2.4 CITY-ST-ZIP CITY-ST-ZIP **▼** DELETE XX Change Addition TITLE 31 TITLE MONTGOMERY, EZELLA NEAL Arzella Montgomery NAME 3.2 NAME 245 NW 49TH ST STREET ADDRESS 3.3 STREET ADDRESS 1387 N. W. 22 Avenue Apt 112 MIAMI FL <u>Opa Locka, FL 33054</u> CITY-ST-ZIP 3.4. CITY-ST-ZIP TD Arthur Rutledge X DELETE ☐ Change **X** XAddition TITLE 4.1 TITLE WATERS, IVERSON NAME 4.2 NAME 17645 N.W. 37 Court 1930 NW 153RD ST STREET ADDRESS 4.3 STREET ADDRESS Carol City, FL 33055 MIAMI FL CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change ☐ Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change TITLE 6.1 TITLE 700002266287 NAME 6.2 NAME -08/13/97--01098--023 STREET ADDRESS 6.3 STREET ADDRESS ***61.25 CITY - ST - ZIP 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

01 RP. F.D. I Reiford 7/20/07 (05/) 701-1016

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

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