2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#712435

FILED Apr 19, 2006 Secretary of State

Entity Name: ST. MARK MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1470 NW MIAMI, FL					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
1470 NW MIAMI, FL					
FEI Numbei	r: 59-2085818	FEI Number Applied For ()	FEI Number Not Applicable()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address o	f New Registered Agent:	
2761 NW	N WILLIAMS, F 174TH ST ARDENS, FL 3				
	e named entity te of Florida.	submits this statement for th	ne purpose of changing its registered	d office or registered agent, or both,	
SIGNATU					
	Electro	nic Signature of Registered	Agent	Date	
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHANGI	ES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	WILLIAMS, JC 2030 N.W. 89	TH STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HARRIS, WILL 8770 N.W. 22	PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	JONES, DAIS) 17220 N.W. 1	1 AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD (WILLIAMS, JC 2030 NW 89TH MIAMI, FL 33	H ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
	,) Delete LEEN	Title: Name: Address:	() Change () Addition	
Title: Name: Address: City-St-Zip:	EVANS, GERA 3020 NW 1521 MIAMI GARDE	ND TER :NS, FL 33054	City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JOSEPH F. WILLIAMS PD 04/19/2006