## FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B, Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT# /12889 (5)										
MIAMI LAKES BAPTIST CHURCH, INC.										
4400 8441	EINEO OTT	1101 011011011	1110				)	IAN BOBAN BABAN BUBUN BIRKA	11811 01811 1881	
Dringle at Ding	o of Dunings		Mailing Address	AA-W						
Principal Plac	e of Business		Mailing Address	Mailing Address						
8250 MIAMI LAKES DR E   6250 MIAMI LAKES DR E   MIAMI LAKES FL 33014   MIAMI LAKES FL 33014-27										
US	1 00014		U\$				7-			
						3. Date Incorporated or Qualified 06/07/1967	3a. Date of Last 04/26/19			
	lace of Busines	SS	2a. Mailing Address			4. FEI Number 59-2334289	<b>⊢</b>	pplied For		
Suite, Apt.	# oto		Suite, Apt. #, etc.			39 2334209	60.75	lot Applicable		
22	w, 610.			27			5. Certificate of Status Desired		Additional Regulred	
City & Stat	6	<del></del> -	City & State			6. Election Campaign Financing	\$5.00	May Be		
23			28				Trust Fund Contribution		l to Fees	
Zip	Country		Zip	├──┐			8. This corporation has liability for intangible tax under s. 199.032,			
24	9. Name and Address of Current Re			29 30 30			Florida Statutes Yes X No  10. Name and Address of New Registered Agent			
	TO ACCUSED OF COTTO	K Hogistorou Again	· · · · · · · · · · · · · · · · · · ·	81 Name		TO, Fibrille and Address of Nett Flog	istoled Water			
JOE BUSH					De	an	James			
6250 MIAMI LAKES DRIVE EAST					62 Street 62	82 Street Address (P.O. Box Number is Not Acceptable) 6250 Miami Lakes Drive East				
MIAMI LAKES FL 33014					63					
					84 City			- 85 Zir	Code	
					Mi	am1	Lakes	<b>FL</b>   3.	3014	
11. Pursuant office or r	is of Sections 617.050	2 and 617,1508, Florid of Plorida Such chan	da Statutes, oe was auti	the above-named	corpo	oration submits this statement for the public board of directors. I hereby accept	rpose of changing	its registered		
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 World or	prinled name of registered (ge	Server and title if poplicable	Dea	in James, 1	rus	stee/Chairman d when reinslating) Registered Ag	5/21/97		
12.	olghatory, grad or	OFFICERS AN	DIRECTORS 13.			Tequi bi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	- <del>170</del> -		X DE	LETE	1.1 TITLE		TR/D/C/P	K Change	Addition	
NAME	MARSH; D				1.2 NAME		Dean James			
STREET ADDRESS		<del>ai lakeo drive e</del> a	<del>IST-</del>	1.3 STREET ADDRES			6250 Miami Lakes Driv			
CITY-ST-ZIP	-MIAMI-LAI	<del>(ES-FL-</del>	101 NE	1575	1.4 CITY-ST-ZIP			014		
TITLE	-OTAD	<u>r.</u> .	X DE	LEIE	2.1 TITLE	ı	TR/D/VP Javier Cruz	Change	Addition	
NAME Street address	BUSH, JO	<del>e-</del> <del>VII LAKES DR E</del> -			2.2 NAME 2.3 STREET ADDRESS	ı	6250 Miami Lakes Driv	ro Foot		
STREET ADDRESS	-MAMI LAI				2.4 CITY+ST-ZIP	l	Miami Lakes, FL 330			
THE	-1R0-	10012	X DE	LETE	3.1 TITLE		TR/D/S	Change	K Addition	
NAME	-OIOA, JOE	<del>-</del> -			3.2 NAME	ı	Mark Chandler	_		
STREET ADDRESS		AI LAKES DRIVE EA	<del>.T3</del>		3.3 STREET ADDRESS		6250 Miami Lakes Driv	e East		
CITY-ST-ZIP	-MIAMI-LAI	<del>(ES FL</del>			3.4. CiTY - ST - ZIP		Miami Lakes, FL 330	014		
TITLE	<del>-110-</del> -	<b></b>	X DE	LETE	4.1 TITLE	·	TR/D	Change	☐ Addition	
NAME	JAMES, D				4. 2 NAME		Jonathan Pipping			
STREET ADDRESS		MI-LAKES DR E			4.3 STREET ADDRESS		6250 Miami Lakes Driv			
CITY-ST-ZIP TITLE	MIAMI LAI	COTE-	<b>Jx</b> DE	LETE	4.4 CITY-ST-ZIP 5.1 TITLE	ļ <u></u>	Miami Lakes, FL 330	J14 ☐ Change	☐ Addition	
NAME		JONATHAN-			5.1 IIILE 5.2 NAME			□ Avanāe	L ADDITION	
STREET ADDRESS		H-LAKES DR E			5.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI LA				5.4 CITY-ST-ZIP					
TITLE	***************************************		DE	LETE	6.1 T/TLE			Change	☐ Addition	
NAME					6.2 NAME					
STREET ADDRESS					6.3 STREET ADDRESS					
OITY OT NO	1				£4 (17V 07 7ID	l				

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 trissee 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.

Jun 13 1997 8:00am

Secretary of State