2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2007
Secretary of State

DOCUMENT# 712995

Entity Name: ST. MARY'S MISSIONARY BAPTIST CHURCH OF NORTH MIAMI BEACH, INC.

Current Principal Place of Business:

1550 NE 152ND TERRACE
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

1550 NE 152ND TERRACE
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 65-0881009 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CAMPBELL, MARY
1592 NE 151ST TERRACE
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	FUDGE, DWAYNE	
Address:	3130 S W 35TH AVE	
City-St-Zip:	HOLLYWOOD, FL 33023	
Title:	D	( ) Delete
Name:	CORBETT, LAWRENCE	
Address:	3925 NW 195TH ST	
City-St-Zip:	MIAMI, FL 33056	
Title:	VP	( ) Delete
Name:	PAYNE, MARDEAN	
Address:	125 NW 191ST	
City-St-Zip:	MIAMI, FL 33169	
Title:	D	( ) Delete
Name:	PAYNE, FREDDIE	
Address:	125 NW 191 ST	
City-St-Zip:	MIAMI, FL 33169	
Title:	D	( ) Delete
Name:	CAMPBELL, MARY	
Address:	1592 NE 151ST TERRACE	
City-St-Zip:	NORTH MIAMI BEACH, FL 33162	
Title:	D	( ) Delete
Name:	MORRIS, CARMEN	
Address:	693 N E 82ND TERRACE	
City-St-Zip:	MIAMI, FL 33138	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
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: CARMEN MORRIS D 03/13/2007

Electronic Signature of Signing Officer or Director — Date