FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 717306 (5)

1. Corporation Name

MIAMI SHORES BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
370 GRAND CONCOURSE MIAMI SHORES FL 33138	370 GRAND CONCOURSE MIAMI SHORES FL 33138

3. Date Incorporated or Qualified: 10/06/1969

3a. Date of Last Report: 05/22/1995

2. Principal Place of Business — 21

2a. Mailing Address — 26

Suite, Apt. #, etc. — 22

Suite, Apt. #, etc. — 27

City & State — 23

City & State — 28

Zip — 24 Country — 25

Zip — 29 Country — 30

4. FEI Number: 59-0700565 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

JONES, LANE
714 NE 118 ST.
MIAMI FL 33161

10. Name and Address of New Registered Agent

81 Name: Mitchell, Anthony

82 Street Address (P.O. Box Number is Not Acceptable): 125 N. E. 86 St.

83

84 City: Miami FL 85 Zip Code: 33138

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: Anthony D. Mitchell — Anthony Mitchell, President — DATE: 4/22/96

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	S	☒ DELETE	1.1 TITLE	V	☐ Change ☒ Addition
NAME	WILLIX, BRUCE		1.2 NAME	Moberg, Carl E.	
STREET ADDRESS	12845 NW 1 AVE.		1.3 STREET ADDRESS	1566 N. E. 104 St.	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	Miami Shores, Fl. 33138	
TITLE	V	☒ DELETE	2.1 TITLE	D	☐ Change ☒ Addition
NAME	MILAR, GEORGE C.		2.2 NAME	Millar, Roy	
STREET ADDRESS	11855 W BISCAYNE CANAL RD		2.3 STREET ADDRESS	50 N. E. 104 St.	
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP	Miami Shores, Fl. 33138	
TITLE	D	☒ DELETE	3.1 TITLE	D	☐ Change ☒ Addition
NAME	JENKINS, WAYNE		3.2 NAME	Keen, James W.	
STREET ADDRESS	2918 HELSINKI CIR.		3.3 STREET ADDRESS	10690 London St.	
CITY-ST-ZIP	COOPER CITY FL		3.4 CITY-ST-ZIP	Cooper City, Fl. 33026	
TITLE	D	☒ DELETE	4.1 TITLE	S	☐ Change ☒ Addition
NAME	MADSEN, PAUL A		4.2 NAME	Jones, Stephen H.	
STREET ADDRESS	6250 MOULTRIE PL		4.3 STREET ADDRESS	1060 N. E. 92 St.	
CITY-ST-ZIP	MIAMI LAKES FL		4.4 CITY-ST-ZIP	Miami Shores, Fl. 33138	
TITLE	D	☐ DELETE	5.1 TITLE	P	☒ Change ☐ Addition
NAME	MITCHELL, ANTHONY		5.2 NAME		
STREET ADDRESS	135 NE 86 ST.		5.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		5.4 CITY-ST-ZIP		
TITLE	P	☒ DELETE	6.1 TITLE	D	☐ Change ☒ Addition
NAME	JONES, LANE		6.2 NAME	Dodds, Benjamin G.	
STREET ADDRESS	714 NE 118TH ST		6.3 STREET ADDRESS	380 N. E. 117 St.	
CITY-ST-ZIP	MIAMI FL		6.4 CITY-ST-ZIP	Miami, Fl. 33161	

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Anthony D. Mitchell — 4/22/96 — 305-835-6157

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #