

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717306

FILED
Apr 20, 2009
Secretary of State

Entity Name: MIAMI SHORES BAPTIST CHURCH, INC.

Current Principal Place of Business:

370 GRAND CONCOURSE
MIAMI SHORES, FL 33138

New Principal Place of Business:

Current Mailing Address:

370 GRAND CONCOURSE
MIAMI SHORES, FL 33138

New Mailing Address:

FEI Number: 59-0700565

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MITCHELL, ANTHONY D
125 N.E. 86TH STREET
MIAMI, FL 33138 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: S () Delete
Name: ALFONSO, CARLOS
Address: 3841 SW 147 AVE
City-St-Zip: MIRAMAR, FL 33027

Title: P () Delete
Name: MITCHELL, ANTHONY D
Address: 125 NE 86TH ST
City-St-Zip: MIAMI, FL 33138

Title: D () Delete
Name: MEADER, DAVID
Address: 19340 NE 2ND AVE
City-St-Zip: MIAMI, FL 33179

Title: AS () Delete
Name: CESAR, SASTRE
Address: 1086 N.E. 96TH ST.
City-St-Zip: MIAMI SHORES, FL 33138

Title: D () Delete
Name: LUC, MARCEL
Address: 141 NW 100 ST
City-St-Zip: MIAMI, FL 33150

Title: V () Delete
Name: REESE, SID
Address: 960 N.E. 96 ST
City-St-Zip: MIAMI SHORES, 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: AS (X) Change () Addition
Name: CESAR, SASTRE
Address: 6101 UMBRELLA TREE LANE.
City-St-Zip: TAMARAC, FL 33319

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 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: ANTHONY D. MITCHELL

PRES

04/20/2009

Electronic Signature of Signing Officer or Director

Date