

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718844

FILED
Jan 14, 2009
Secretary of State

Entity Name: THE CHRISTIAN FELLOWSHIP MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

8100 N.W. 17TH AVENUE
CHURCH
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

8100 N.W. 17TH AVENUE
CHURCH
MIAMI, FL 33147

New Mailing Address:

FEI Number: 59-1726047 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

COLEMAN, CHARLES E.
853 NW 74TH STREET
MIAMI, FL 33150 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: PD () Delete
Name: COLEMAN, CHARLES E., REV
Address: 853 N.W. 74TH ST.
City-St-Zip: MIAMI, FL 33150

Title: D () Delete
Name: MOORE, RHUNETTE D
Address: 2700 NW 50TH ST
City-St-Zip: MIAMI, FL 33127

Title: TD () Delete
Name: TURNER, SHERRIEL
Address: 485 NW 88TH ST
City-St-Zip: EL PORTAL, FL 33150

Title: CD () Delete
Name: BROWN, CHARLES
Address: 1600 NW 89TH ST
City-St-Zip: MIAMI, FL 33147

Title: S () Delete
Name: JACKSON, JOANN Y,
Address: 14545 N.W. 11TH COURT
City-St-Zip: MIAMI, FL

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:

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: SHERRIEL TURNER

MRS.

01/14/2009

Electronic Signature of Signing Officer or Director

Date