## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#720106**

Current Principal Place of Rusiness:

Entity Name: SOUTH DADE BAPTIST CHURCH, INC.

FILED May 04, 2004 Secretary of State

New Principal Place of Rusiness:

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17105 S.W. 296 ST. P.O. BOX 1589 HOMESTEAD, FL 330908589	
Current Mailing Address:	New Mailing Address:
17105 S.W. 296 ST. P.O. BOX 1589 HOMESTEAD, FL 330908589	
FEI Number: 59-1141825 FEI Number Applied For ( ) FEI Number	umber Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
FRYER, JAMES C FRYER 17105 SW 296 ST. HOMESTEAD, FL 33030 US	LONG, BILL PASTOR 16901 SW 296 STREET HOMESTEAD, FL 33030 US
The above named entity submits this statement for the purpose in the State of Florida.	of changing its registered office or registered agent, or both,
SIGNATURE: PASTOR BILL LONG	05/04/2004
Electronic Signature of Registered Agent	Date
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: C ( ) Delete Name: FRYER, JAMES C Address: 17105 SW 296 STREET City-St-Zip: HOMESTEAD, FL 33030 US	Title: C (X) Change ( ) Addition Name: LONG, BILL PASTOR Address: 17105 SW 296 STREET City-St-Zip: HOMESTEAD, FL 33030 US

HOMESTEAD, FL 33030 US City-St-Zip: Title:

Title:

Name:

Address:

() Delete

EBERSOLE, TIM

17340 SW 301 ST

( ) Delete

SCHLICHT, KURT Name: 20220 SW 315TH STREET Address: City-St-Zip: HOMESTEAD, FL 33030

( ) Delete Title: MARTSCHINSKE, DON Name: 52 NW 18 STREET Address:

City-St-Zip: HOMESTEAD, FL 33035 US

Title: (X) Delete HAYNES, BENJAMIN Name:

245 NE 18TH STREET Address: HOMESTEAD, FL 33030 City-St-Zip:

Title: () Change () Addition

JOE, WHEELER

1538 NW 8TH AVENUE

LOCKHART, ROBERT

30400 SW 193 AVENUE

HOMESTEAD, FL 33030

HOMESTEAD, FL 33030 US

(X) Change ( ) Addition

(X) Change ( ) Addition

() Change () Addition

Name: Address: City-St-Zip:

Title:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

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 Section 119.07(3)(i), 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: ROBERT LOCKHART MR. 05/04/2004