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FILED

Jan 17 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 722826 (5)

1. Corporation Name

MORNING STAR BAPTIST CHURCH, INC.



Principal Place of Business

Mailing Address

22769 S.W. 120TH AVENUE
GOULDS FL 3317022769 S.W. 120TH AVENUE
GOULDS FL 33170-4539

3. Date Incorporated or Qualified

03/03/1972

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

65-0138051

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILLIAMS, WALTER JR
11005 SW 152ND TERRACE
MIAMI FL 33157

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-5-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	☐ DELETE
NAME	MARTIN, ROBERT L.	
STREET ADDRESS	11845 SW 222ND STREET	
CITY-ST-ZIP	GOULDS FL	

1.1 TITLE	☐ Change ☒ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	33170

TITLE	D	☐ DELETE
NAME	TILLMAN, LEON	
STREET ADDRESS	10975 FERRY DRIVE	
CITY-ST-ZIP	MIAMI FL 33176	

2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	10975 Perry Drive

TITLE	D	☐ DELETE
NAME	WILLIAMS, JR., WALTER	
STREET ADDRESS	11005 SW 152ND TERRACE	
CITY-ST-ZIP	MIAMI FL 33157	

3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

TITLE	D	☐ DELETE
NAME	STRACHAN, FRANCES	
STREET ADDRESS	20011 SW 117TH COURT	
CITY-ST-ZIP	MIAMI FL 33177	

4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

TITLE	CD	☐ DELETE
NAME	JONES, MOSES	
STREET ADDRESS	11835 SW 223RD STREET	
CITY-ST-ZIP	GOULDS FL	

5.1 TITLE	☐ Change ☒ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	33170

TITLE	SD	☐ DELETE
NAME	POKE, SARAH P.	
STREET ADDRESS	26710 SW 137TH AVENUE	
CITY-ST-ZIP	NARANJA FL	

6.1 TITLE	☐ Change ☒ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	33032-7764

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0032444

CR2E037 (9/96)