## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 722826

1. Corporation Name

MORNING STAR BAPTIST CHURCH, INC.

Principal Place of Business 22769 S.W. 120TH AVENUE

Mailing Address

GOULDS FL 33170

22769 S.W. 120TH AVENUE GOULDS FL 33170

## FILED May 10, 1999 8:00 am § Secretary of State

05-10-1999 90168 021 \*\*\*\*61.25



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualifed 03/03/1972		_		
21 Cuita Ant	#	Suite, Apt. #, etc.			4. FEI Number	Ani	olied For	
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.				65-0138051	<del></del>	Applicable	
City & State City & State						\$8.75 A	dditional	
23 28					5. Certificate of Status Desired	Fee Re	quired	
Zip	Country Zip		Country,		6. Election Campaign Financing	<u> </u>	May Be	
24	25 29		30		Trust Fund Contribution	Added to		
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
			81	Name			ì	
WILLIAMS, WALTER JR				82 Street Address (P.O. Box Number is Not Acceptable)				
11005 SW 152ND TERRACE			OLI Super reduces (1.0. dex realized to recordance)					
MIAMI FL 33157								
IND-UNI I C	33137		24	016		85 Zip C	ode.	
			84	City	, * .	FL     `		
f1. Pursuant	to the provisions of Sections 617,050	2 and 617.1508, Florida Statutes,	the above	-named corpo	pration submits this statement for the project of directors. I hereby account	ourpose of changing its	registered	
office or n	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was autr tions of, Section 617.0503, Florida	a Statutes.	ne corporatio	n's board of directors. I hereby accept	, the appointment as reg	3,510,00	
SIGNATURE								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re				signature required	when reinstating) ADDITIONS/CHANGES TO OFF	DATE AND DIRECTO	DC IN 12	
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFF			
TITLE	D ·	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition	
NAME	MARTIN, ROBERT L.		1.2 NAME					
STREET ADDRESS	11845 SW 222ND STREET		1.3 STREET ADDRESS					
CITY-ST-ZIP	GOULDS FL 33170		1.4 CITY- ST	-ZIP				
TITLE	D	☐ DELETE . 2.1 T				Change	Addition Addition	
NAME	TILLMAN, LEON		2.2 NAME	]				
STREET ADDRESS	10975 PERRY DRIVE		2.3 STREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33176		2. 4 CITY-S	r-ZIP				
TITLE	D	□ DELETE	3.1 TITLE			☐ Change	☐ Addition	
NAME	WILLIAMS, JR., WALTER		3.2 NAME					
STREET ADDRESS	11005 SW 152ND TERRACE		3.3 STREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33157		3.4. CITY-ST-ZIP					
TITLE			4.1 TITLE			Change	Addition	
NAME	STRACHAN, FRANCES		4. 2 NAME				ı	
STREET ADDRESS	20011 SW 117TH COURT		4.3 STREET	ADORESS				
C!TY-ST-ZIP	MIAMI FL 33177		4.4 CITY-S1	ZIP				
TITLE	CD	☐ DELETE				Change	☐ Addition	
NAME	JONES, MOSES		5.2 NAME					
STREET ADDRESS	11835 SW-223RD STREET-		.5.3 STREET	ADDRESS	_	٠,.		
CITY-ST-ZIP	GOULDS FL 33170		5.4 CITY-ST	-ZIP	·			
TITLE	SD	DELETE 6.1 T				Change	☐ Addition	
NAME	POKE, SARAH P.		6.2 NAME					
STREET ADORESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP	NARANJA FL 33032		6.4 CITY-ST					
14. I hereby r	certify that the information supplied wi	th this filing does not qualify for th	e exempti	on stated in S	ection 119.07(3)(i), Florida Statutes. I	further certify that the in	nformation	

indicated on this annual report or supplied with this limit does not qualify for its exemption stated in 19.5.7 (b), its first and stated in this 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, with all other like empowered.

SIGNATURE: