


**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 15, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # 724680**  
 1. Entity Name  
**NEW MOUNT CALVARY MISSIONARY BAPTIST CHURCH, INCORPORATED, OF MIAMI, FLORIDA**



Principal Place of Business \_\_\_\_\_ Mailing Address \_\_\_\_\_

**DO NOT WRITE IN THIS SPACE**



01112004 No Chg-NP CR2E037 (10/03)

4. FEI Number <b>65-0736068</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

5. Name and Address of Current Registered Agent  
**BLOUNT, E.**  
**1830 N.W. 70TH STREET**  
**MIAMI, FL 33147**

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25**  
**Due by May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C LAIRD, ODOM 3521 NW 208TH ST. OPALOCKA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JONES, THOMAS 11220 NW 22 AVE ROAD MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC BLOUNT, E. 1830 N.W. 70TH STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CT BUTLER, MICHAEL 13341 SW 25TH ST. PRINCTON, FL 33032
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000005143  
 01/15/04-80039-025 61.25

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other info empowered.

**SIGNATURE:** *E. Blount* **1/12/04** **305 638 4661**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day, time Phone #