

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 18, 2007 8:00 am
Secretary of State

05-18-2007 90027 033 ****65.25

DOCUMENT # 726919

1. Entity Name

MT. SINAI BAPTIST CHURCH OF PERRINE, INC.



Principal Place of Business

10041 JESSAMINE STREET
PERRINE FL 33157-5366

Mailing Address

10041 JESSAMINE STREET
PERRINE FL 33157-5366

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

65-0152637

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ENGEL, DANIEL W., ESQ
1266 W. FLAGLER ST.
MIAMI FL 33135

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

T ☐ Delete
NAME JONES, ALLEN
STREET ADDRESS 14701 SW 104 AVE
CITY-ST-ZIP MIAMI FL 33176

TD ☐ Delete
NAME SURRANEY, CORA
STREET ADDRESS 14521 TYLER STREET
CITY-ST-ZIP MIAMI FL

PD ☐ Delete
NAME BELL, REV REMARK (TRUST)
STREET ADDRESS 16701 SW 105HT AVE
CITY-ST-ZIP MIAMI FL

T ☐ Delete
NAME WALKER, ANDRILLA
STREET ADDRESS 17810 SW 102 AVE
CITY-ST-ZIP PERRINE FL

DST ☐ Delete
NAME HANNA, MARY LOU
STREET ADDRESS 10045 S.W. 172ND ST.
CITY-ST-ZIP MIAMI FL 33157

T ☐ Delete
NAME JONES, CYNCHIA
STREET ADDRESS 17750 S.W. 105 AVE.
CITY-ST-ZIP MIAMI FL 33157

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
TITLE
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 like empowered.

SIGNATURE: *Mary Lou Hanna* *Mary Lou Hanna* 5/3/07 205-235-3381
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #