

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726919

FILED
Mar 17, 2009
Secretary of State

Entity Name: MT. SINAI BAPTIST CHURCH OF PERRINE, INC.

Current Principal Place of Business:

10041 JESSAMINE STREET
PERRINE, FL 331575366

New Principal Place of Business:

Current Mailing Address:

10041 JESSAMINE STREET
PERRINE, FL 331575366

New Mailing Address:

FEI Number: 65-0152637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: JONES, ALLEN
Address: 14701 SW 104 AVE
City-St-Zip: MIAMI, FL 33176

Title: TD () Delete
Name: SURRANEY, CORA
Address: 14521 TYLER STREET
City-St-Zip: MIAMI, FL

Title: PD () Delete
Name: BELL, REV REMARK (TRUST)
Address: 16701 SW 105HT AVE
City-St-Zip: MIAMI, FL

Title: T () Delete
Name: WALKER, ANDRILLA
Address: 17810 SW 102 AVE
City-St-Zip: PERRINE, FL

Title: DST () Delete
Name: HANNA, MARY LOU
Address: 10045 S.W. 172ND ST.
City-St-Zip: MIAMI, FL 33157

Title: T (X) Delete
Name: JONES, CYNCHIA
Address: 17750 S.W. 105 AVE.
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARY LOU HANNA

DST

03/17/2009

Electronic Signature of Signing Officer or Director

Date