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Apr 23 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 728235 (3)
1. Corporation Name
SALEM BAPTIST CHURCH OF GREATER MIAMI, INC.



Principal Place of Business Mailing Address
2945 N.W. 62 STREET 2945 N.W. 62 STREET
MIAMI FL 33147 MIAMI FL 33147

3. Date Incorporated or Qualified

01/10/1974

4. FEI Number

59-2100830

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GRAVES,JOHN
3010 N.W. 92ND STREET
MIAMI FL 33147

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

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE
NAME MOZELL, ALPONZA
STREET ADDRESS 10000 NW 1ST PL 17845 E 6 Ave
CITY - ST - ZIP N. MIAMI BCH. FL 33162

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

TITLE VP ☐ DELETE
NAME GRAVES,JOHN
STREET ADDRESS 3010 N.W. 92ND STREET
CITY - ST - ZIP MIAMI FL 33147

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE S ☐ DELETE
NAME STITT,MARTHA
STREET ADDRESS 8900 N.W. 14TH AVE.
CITY - ST - ZIP MIAMI FL 33147

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

TITLE T ☒ DELETE
NAME JAMES,DAVID
STREET ADDRESS 1510 N.W. 43RD STREET
CITY - ST - ZIP MIAMI FL 33142

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME ROBERT CONEY
4.3 STREET ADDRESS 1965 N. W. 8end ST
4.4 CITY - ST - ZIP MIAMI, FL 33147

TITLE D ☒ DELETE
NAME GAITHER, CHARLES
STREET ADDRESS 819 N.W. 51TH STREET
CITY - ST - ZIP MIAMI FL 33142

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME D
5.3 STREET ADDRESS ERIC GRAVES
5.4 CITY - ST - ZIP 3010 N.W. 92nd Street
MIAMI, FL. 33147

TITLE D ☐ DELETE
NAME MOZELL, LARRY
STREET ADDRESS 5025 NW 5TH CT 2280 N.W. 66 St
CITY - ST - ZIP MIAMI FL 33147

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I 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]* ALPONZA MOZELL

4/14/1998

CR2E037 (10/97)