

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 30, 2008  
Secretary of State**

DOCUMENT# 728563

Entity Name: NEW SHILOH MISSIONARY BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

1350 N.W. 95TH STREET  
MIAMI, FL 33147

**New Principal Place of Business:**

**Current Mailing Address:**

1350 N.W. 95TH STREET  
MIAMI, FL 33147

**New Mailing Address:**

FEI Number: 59-0658731      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

BARRY BOREN, ESQ  
9200 S DADELAND BLVD 412  
MIAMI, FL 33156      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: PD ( ) Delete  
Name: POWELL, D.L. REV  
Address: 1350 N.W. 95TH STREET  
City-St-Zip: MIAMI, FL 33147

Title: TD ( ) Delete  
Name: DAVIS, FRANCES  
Address: 5525 NW 9 AVE  
City-St-Zip: MIAMI, FL 33127

Title: SD ( ) Delete  
Name: ROUNDTREE, CLARA  
Address: 1358 N.W.  
City-St-Zip: MIAMI, FL 33147

Title: SD ( ) Delete  
Name: LOVETT, BRENDA  
Address: 6711 N.W. 29TH AVE.  
City-St-Zip: MIAMI, FL 33147

Title: TD ( ) Delete  
Name: ALEXANDER, MAXINE  
Address: 3525 NW 213 ST  
City-St-Zip: OPA LOCKA, FL 33056

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: SD (X) Change ( ) Addition  
Name: ROUNDTREE, CLARA  
Address: 1358 N.W. 96 ST  
City-St-Zip: MIAMI, FL 33147

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: BRENDA LOVETT

SD

04/30/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date