## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1998

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 73

737559

(5)

VILLAGE GREEN MISSIONARY BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 4707 S.W. 127TH AVENUE 4707 S.W. 127TH AVENUE 3. Date Incorporated or Qualified MIAMI FL 33175 MIAMI FL 33175 <u>12/15/1976</u> 4. FÉI Number Applied For 05-0138508 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 707 4707 SW 127 Ave Fee Required Suite, Apt. #, etc. uite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be Miam Trust Fund Contribution  $M_{I}am_{I}$ 27 Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No 23 28 Country Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 30 Personal Property Tax due June 30. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name HOVER, TOM 82 Street Address (P.O. Box Number is Not Acceptable) 4807 S.W. 127 AVENUE 83 **MIAM! FL 33175** 84 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, typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. Change TITLE ☐ DELETE 1.1 TITLE Addition PD NAME HOVER, TOM 1.2 NAME GVA CLI WZ 7084 4807 S.W. 127TH AVE 1.3 STREET ADDRESS STREET ADDRESS Miami Fl. CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE STD LEHNHARD, GARY NAME 2.2 NAME SNY LEI MS COCH 4707 S W 127TH AVE 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE Change Addition TITLE ۷D 3.1 TITLE **GREENING. PAUL** NAME 3.2 NAME 4707 S W 127TH AVE 3.3 STREET ADDRESS 4707 SW 127 Ave STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 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 accurrate 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.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE: Down R. J. Rock ad Collin R. Lehnhard

DELETE

DELETE

2-9-98

305-557-2727

☐ Change

Change

Addition

Addition

**FILED** 

Mar 16 1998 8:00am

Secretary of State

CHZH28/ (10997)