2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 06, 2005 8:00 am
Secretary of State
09-06-2005 90136 049 ****61.25

DOCUMENT # 737559

1. Entity Name
VILLAGE GREEN MISSIONARY BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
4707 SW 127 AVE MIAMI, FL 33175 US	4707 SW 127 AVE MIAMI, FL 33175 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

09022005 Chg-NP CR2E037 (10/03)

4. FEI Number 05-0138508 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LEEDS, HAROLD
4707 SW 127 AVE
MIAMI, FL 33175

7. Name and Address of New Registered Agent

Name Waggoner, Thomas
Street Address (P.O. Box Number is Not Acceptable) 4807 SW 127 Avenue
City Miami FL Zip Code 33175

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 Thomas C Waggoner 9/2/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 7, 2005

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TSD LEHNHARD, GARY 4707 SW 127 AVE MIAMI, FL 33175	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	13405 SW 72 Terr. Miami, 33183
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD LEEDS, HAROLD 4707 SW 127 AVE MIAMI, FL 33175	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	15931 SW 104 Terr. Miami, 33196
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WAGGONER, THOMAS 4707 SW 127 AVE MIAMI, FL 33175	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	4807 SW 127 Ave.
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PEDRAYES, ALBERT 4707 SW 127TH AVENUE MIAMI, FL 33175	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	8899 SW 133 Court Unit B Miami, FL 33186-1719
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	

12. 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 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: Thomas C Waggoner President 9/2/05 Fri, 11:30am (305)220-0990
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #