

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737559

FILED  
Apr 17, 2008  
Secretary of State

**Entity Name:** VILLAGE GREEN MISSIONARY BAPTIST CHURCH AND CHRISTIAN SCHOOL, INC.

**Current Principal Place of Business:**

4707 SW 127 AVE  
MIAMI, FL 33175 US

**New Principal Place of Business:**

**Current Mailing Address:**

4707 SW 127 AVE  
MIAMI, FL 33175 US

**New Mailing Address:**

FEI Number: 05-0138508      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

WAGGONER, THOMAS  
4807 SW 127 AVENUE  
MIAMI, FL 33175 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: TSD ( ) Delete  
Name: LEHNHARD, GARY,  
Address: 13405 SW 72 TERR  
City-St-Zip: MIAMI, FL 33183

Title: VD ( ) Delete  
Name: PEDRAYES, ALBERT  
Address: 8899 SW 133 COURT, UNIT B  
City-St-Zip: MIAMI, FL 331861719

Title: PD ( ) Delete  
Name: WAGGONER, THOMAS C  
Address: 4807 SW 127 AVE  
City-St-Zip: MIAMI, FL 33175

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

Title: VD (X) Change ( ) Addition  
Name: LEHNHARD, GARY,  
Address: 13405 SW 72 TERR  
City-St-Zip: MIAMI, FL 33183

Title: TSD (X) Change ( ) Addition  
Name: PEDRAYES, ALBERT  
Address: 8899 SW 133 COURT, UNIT B  
City-St-Zip: MIAMI, FL 331861719

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: THOMAS WAGGONER

PD

04/17/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date