FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT #

739167

(5)

SHENA	ANDOAH BAPTIST CHURC	CH OF MIAMI, INC.				
Principal Place of Business Mailing Address				t indhiri akada relia laini aldin diiti läär akali	AIRIL BIBIL GIBIL BIRIL BIBILIBI	
2225 S W 17 AVENUE 2225 S W 17 AVENUE				3. Date Incorporated or Qualified		
MAMI FL 33145		MIAMI FL 33145		05/26/1977		
				4. FEI Number	Applied For	
				59-0751931	Not Applicable	
2. Principal Place of Business 2. Mailing Address			5. Certificate of Status Desired	\$8.75 Additional		
21		28			Fee Required	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be	
22 27				Trust Fund Contribution	Added to Fees	
City & State City & State			7. Is this nonprofit corporation a homeowners association?			
Zip	Country	Zip	Country	8. This corporation owes or has paid the		
24	25	29	30	Personal Property Tax due June 30.	Yes No	
9. Name and Address of Current Registered Agent			81 Name	10. Name and Address of New Registered Agent		
11. Pursuant	to the provisions of Sections 617.	0502 and 617.1508. Florida Statul	84 City	orporation submits this statement for the purpos		
OTICE OF agent. I a	registered agent, or both, in the St am familiar with, and accept the ot	late of Florida. Such change was oligations of, Section 617.0503, Fl	authorized by the corpo orida Statutes.	orporation submits this statement for the purpositation's board of directors. I hereby accept the a	appointment as registered	
	Signature, typed or printed name of registered	agent and title if applicable. (NO	E: Registered Agent signature re			
12.	OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D	DELETE	1.1 TITLE		Change Addition	
NAME	FISH, HORACE		1.2 NAME			
STREET ADDRESS	5984 NE 5 CT		1.3 STREET ADDRESS			
CITY-ST-ZIP	MAIMI FL		1.4 CITY - ST - ZIP			
TITLE	T	DELETE	2.1 TITLE		Change Addition	
NAME	ROBERTS, JACK		2.2 NAME			
STREET ADDRESS	269 SW 19TH RD		2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33129		2.4 CITY-ST-ZIP			
TITLE	T = -	☐ DELETE	3.1 TITLE		Change Addition	
NAME	RICHARDSON, ESTELLA		3.2 NAME			
STREET ADDRESS	1225 S.W. 20 STREET		3.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33145		3.4. CITY-ST-ZIP			
TITLE	T	☐ DELETÉ	4.1 TITLE		Change Addition	
NAME	WEBBER, MARY E		4. 2 NAME			
STREET ADDRESS	1961 S.W. 18 AVENUE		4.3 STREET ADDRESS			

6.4 CITY-ST-ZIP 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.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE 6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-S1-ZIP

NAME

TITLE

MIAMI FL 33145

DELETE

DELETE

305-856-1647

Change

Change

Addition

Addition

FILED

Apr 14 1998 8:00am

Secretary of State