

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739394

FILED
Mar 20, 2009
Secretary of State

Entity Name: CORINTH MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

1435 N.W. 54TH ST.
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

1861 NW 51ST STREET
MIAMI, FL 33142

New Mailing Address:

FEI Number: 59-2066162 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PASCHAL, MOSES
1861 NW 51ST ST
MIAMI, FL 33142 US

Name and Address of New Registered Agent:

PASCHAL, MOSES, SR.
1861 NW 51ST ST
MIAMI, FL 33142 US

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: MOSES L. PASCHAL, SR.

03/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BROOMFIELD, RONALD
Address: 16126 SW 16TH ST
City-St-Zip: PEMBROKE PINES, FL 33027

Title: TD () Delete
Name: TOWNSEND, WILLIE,
Address: 5821 N.W. 32ND AVENUE
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: PASCHAL, MOSES JR.
Address: 16169 SW 16TH ST
City-St-Zip: PEMBROKE PINES, FL 33027

Title: P () Delete
Name: PASCHAL, MOSES,
Address: 1861 N.W. 51ST STREET
City-St-Zip: MIAMI, FL

Title: C () Delete
Name: PASCHAL, GENEVA,
Address: 1861 N. W. 51ST ST.
City-St-Zip: MIAMI, FL

Title: S () Delete
Name: BROOMFIELD, GENEVA
Address: 16126 SW 16TH STREET
City-St-Zip: HOLLYWOOD, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: M (X) Change () Addition
Name: PASCHAL, MOSES JR.
Address: 16169 SW 16TH ST
City-St-Zip: PEMBROKE PINES, FL 33027

Title: P (X) Change () Addition
Name: PASCHAL, MOSES, SR.,
Address: 1861 N.W. 51ST STREET
City-St-Zip: MIAMI, FL

Title: C (X) Change () Addition
Name: PASCHAL, JEAN,
Address: 1861 N. W. 51ST ST.
City-St-Zip: MIAMI, FL

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: MOSES L.PASCHAL, SR.

P

03/20/2009

Electronic Signature of Signing Officer or Director

Date