

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745767

FILED
Jan 23, 2007
Secretary of State

Entity Name: NEW JERUSALEM PRIMITIVE BAPTIST CHURCH, INC.

Current Principal Place of Business:

777 NW 85TH STREET
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

777 NW 85TH STREET
MIAMI, FL 33150

New Mailing Address:

FEI Number: 59-1859373

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUKE, KENNETH A
777 N.W. 85TH STREET
MIAMI, FL 33150 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: D () Delete
Name: HOWARD, JAMES MR.
Address: 6740 AZALEA DR
City-St-Zip: MIRAMAR, FL 33023

Title: D () Delete
Name: WEBB, EMORY MR.
Address: 3260 N.W. 195TH TERR.
City-St-Zip: MIAMI,, FL 33414

Title: D () Delete
Name: SINGLETON, JUANITA MS.
Address: 803 NW 108TH STREET
City-St-Zip: MIAMI, FL 33168

Title: P () Delete
Name: CONNER, WOODROW MR.
Address: 19451 NW 5TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: S () Delete
Name: WHITE, UTHA F MS.
Address: 1840 NW 49 ST.
City-St-Zip: MIAMI, FL 33142

Title: D () Delete
Name: DUKE, KENNETH A PASTOR
Address: 15893 SW 52ND STREET
City-St-Zip: MIRAMAR, 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: () Change () Addition
Name:
Address:
City-St-Zip:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: SABRINA BOUIE

MS.

01/23/2007

Electronic Signature of Signing Officer or Director

Date