


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 746878 1. Entity Name MOUNT VERNON MISSIONARY BAPTIST CHURCH, INC.	
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FILED
Sep 03, 2008 08:00 AM
Secretary of State

Principal Place of Business 1323 NW 54TH ST MIAMI, FL 33142	Mailing Address 1323 NW 54TH ST MIAMI, FL 33142
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05262008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1914695	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent WILLIAMS, LILLAR M. 2115 NW 90TH ST. MIAMI, FL 33147	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstalling) DATE _____

Filing Fee is \$61.25 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000358930 09/03/08 00000 017 70.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MILLER, WILFRED A., JR. 9115 LITTLE RIVER DR. MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WILLIAMS, WALTER J. 10920 NW 26TH AVE MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MOMPLAISIR, STEPHANIE B 20180 NW 14TH CT MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, WALTER J. 10920NW 26TH AVE MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAWLER, IDA 3011 NW 55TH ST MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Walter J. Williams*
WALTER J. WILLIAMS
Date _____ Daytime Phone: (305) 688-3744 (786) 213-1524