

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90065 030 ****61.25

DOCUMENT # 755405

1. Corporation Name

BROWN'S CHAPEL MISSIONARY BAPTIST CHURCH, INC.

Principal Place of Business

1323 NW 54 STREET
254 N.W. 51 STREET
MIAMI FL 33142
US

Mailing Address

254 NW 51 ST
1 SINGLE DWELLING
MIAMI FL 33127
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

Same as

3. Date Incorporated or Qualified

12/05/1980

4. FEI Number

59-1172941

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

23 City & State
Miami, FL, Dade

28 City & State
Same as

24 Zip 33142 25 Country U.S.A.

29 Zip 30 Country

9. Name and Address of Current Registered Agent

ROBINSON, WILLIAM
254 NW 51 ST
MIAMI FL 33127

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE:

Signature, typed or printed name of registered agent - use only if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

William Robinson 4-26-1999

12. OFFICERS AND DIRECTORS

TITLE PD
NAME ROBINSON, WILLIAM
STREET ADDRESS 254 NW 51 ST
CITY-ST-ZIP MIAMI FL 33127

TITLE T
NAME MOSS, DEACON MOSES
STREET ADDRESS 1323 NW 54TH ST
CITY-ST-ZIP MIAMI FL 33142

TITLE T S
NAME HOPKINS, ELOISE
STREET ADDRESS 1323 NW 54 ST
CITY-ST-ZIP MIAMI FL 33142

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

none

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

none

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

none

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 in changed or on an attached list with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William Robinson 4-26-1999 (305) (759-1738)

Date

Daytime Phone #

CR2E037 (11/98)