

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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APPROVED
 AND
 FILED

 1995 MAY -1 PM 5:14
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # H22348
 1. Corporation Name
GREATER TRINITY BAPTIST CHURCH, INC.
25 NW 7 AVE.
DANIA, FL 33004

Principal Place of Business Mailing Address

2. Principal Place of Business
25 NW 7 AVE.
 Suite, Apt. #, etc.
 City & State
DANIA FL
 Zip
33004-3261

2a. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip
 Country

22. Suite, Apt. #, etc.
 City & State
 Zip
 Country

23. City & State
DANIA FL
 Zip
33004-3261

24. Zip
33004-3261

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/24/1984

3a. Date of Last Report
12/23/1994

4. FEI Number
59-2457532

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **\$68.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
MCGREGOR, JOHNNIE F.
18925 NW 43RD COURT
OPA LOCKA FL 33055

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE *Johnnie F. McGregor* **JOHNNIE F. MCGREGOR (P/D)** **4/18/1995**
(Signature, typed or printed name of registered agent and fee if applicable) (NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P/D**
 1.2 NAME **MCGREGOR, JOHNNIE F.**
 1.3 STREET ADDRESS **18925 NW 43RD COURT**
 1.4 CITY - ST - ZIP **OPA LOCKA FL 33055**

2.1 TITLE **V/P/D**
 2.2 NAME **BUTLER, CORNELIUS**
 2.3 STREET ADDRESS **511 NE 32ND ST**
 2.4 CITY - ST - ZIP **OAKLAND PARK FL**

3.1 TITLE **D**
 3.2 NAME **HART, WALTER**
 3.3 STREET ADDRESS **3024 NW 8TH CT**
 3.4 CITY - ST - ZIP **FT. LAUDERDALE, FL 33311**

4.1 TITLE **D**
 4.2 NAME **WALDEN, EUGENE**
 4.3 STREET ADDRESS **320 SW 4TH CT.**
 4.4 CITY - ST - ZIP **DANIA, FL 33004**

5.1 TITLE **D**
 5.2 NAME **PEW, HOMER**
 5.3 STREET ADDRESS **3341 NW 17TH ST**
 5.4 CITY - ST - ZIP **FT. LAUDERDALE, FL 33311**

6.1 TITLE **D**
 6.2 NAME **HOBBS, JAMES**
 6.3 STREET ADDRESS **18930 NW 43RD CT**
 6.4 CITY - ST - ZIP **OPA LOCKA, FL 33055**

7.1 TITLE **D**
 7.2 NAME **PEW, HOMER**
 7.3 STREET ADDRESS **3341 NW 17TH ST**
 7.4 CITY - ST - ZIP **FT. LAUDERDALE, FL 33311**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Johnnie F. McGregor* **JOHNNIE F. MCGREGOR (P/D)** **APRIL 18, 1995 (305)625-2627**
(Signature and typed or printed name of signing officer or director) Date