2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Jun 09, 2004 8:00 am **Secretary of State** DOCUMENT # N00000004473 1. Entity Name 06-09-2004 90217 001 ****61.25 NEW ASSEMBLY OF GALILEE BAPTIST CHURCH, INC. 06-09-2004 90217 002 *****8.75 Principal Place of Business Mailing Address 1238 N.E. 6TH AVE. -1238 N.E. 6TH AVE.- FT. LAUDERDALE FL 33304 DUINIUU AUG FT. LAUDERDALE FL 33304 2. Principal Place of Business 520 NW 42 NO AL MOORE CR2E037 (4/04) City & State 4. FEI Number Applied For AUDERHILL FL 333 65-1030664 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MARCELUS, JAQUES Street Address (P.O. Box Number is Not Acceptable) 2520 NW 42ND AVE. LAUDERHILL FL 33313 City Zip Code 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 reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By September 8, 2004 Trust Fund Contribution. Added to Fees Florida Department of State 10, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD TITLE ☐ Delete TITLE ☐ Change ☐ Addition MARCELLUS, JACQUES NAME 2520 NW 42ND AVE. STREET ADDRESS STREET ADDRESS LAUDERHILL FL 33313 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition MARCELLUS, MIMOSE NAME 2520 NW 42ND AVE. STREET ADDRESS STREET ADDRESS LAUDERHILL FL 33313 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TULLIEN, SYLVIO-827 NW 10TH TERR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33312 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition LOUIS, BERNADETTE E NAME NAME 2840 SUMERSET DR. APT M30# STREET ADDRESS STREET ADDRESS LAUDERDALE LAKES FL 33311 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete DITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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

FILED