


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 29, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # N03000000783</b>	
<b>1. Entity Name</b> FIRST THESSALONIANS MISSIONARY BAPTIST CHURCH INC.	

<b>Principal Place of Business</b> 17861 N.W. 54TH AVE MIAMI, FL 33055	<b>Mailing Address</b> 17861 N.W. 54TH AVE MIAMI, FL 33055
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DO NOT WRITE IN THIS SPACE



03202007 No Chg-NP CR2E037 (4/06)

<b>4. FEI Number</b> 01-0778228	<b>Applied For</b> <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

**6. Name and Address of Current Registered Agent**

PINKSTON, QUINTIN C  
17861 N.W. 54TH AVE  
MIAMI, FL 33055

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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 reinstating) \_\_\_\_\_ **DATE** \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by May 1, 2007</b>	<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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**10. OFFICERS AND DIRECTORS**

<b>TITLE</b>	PD
<b>NAME</b>	PINKSTON, QUINTIN C
<b>STREET ADDRESS</b>	17861 N.W. 54TH AVE
<b>CITY-ST-ZIP</b>	MIAMI, FL 33055
<b>TITLE</b>	VD
<b>NAME</b>	PINKSTON, KATHALEEN C
<b>STREET ADDRESS</b>	17861 N.W. 54TH AVE
<b>CITY-ST-ZIP</b>	MIAMI, FL 33055
<b>TITLE</b>	SD
<b>NAME</b>	CARR, RALPH
<b>STREET ADDRESS</b>	1140 N.W. 89TH STREET
<b>CITY-ST-ZIP</b>	MIAMI, FL 33150
<b>TITLE</b>	D
<b>NAME</b>	CARR, RANDEL
<b>STREET ADDRESS</b>	18020 N.W. 42ND PLACE
<b>CITY-ST-ZIP</b>	MIAMI, FL 33055
<b>TITLE</b>	
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	

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IN THIS SPACE

U000006883559  
04/05/07-80049-018 61.25

**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:** Quentin C. Pinkston 3/25/07 305-625-3703  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #