


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

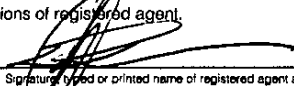
FILED
Jun 19, 2007 08:00 AM
Secretary of State

DOCUMENT # N03000008571	
1. Entity Name GREAT CROWD MISSIONARY BAPTIST CHURCH, INC	

Principal Place of Business 2200 NW 107TH STREET MIAMI, FL 33167	Mailing Address 2200 NW 107TH STREET MIAMI, FL 33167
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4. FEI Number 20-0274422		Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required

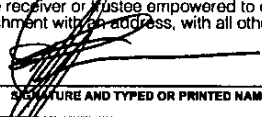
6. Name and Address of Current Registered Agent WILLIAMS, LAURNA 7161 PEMBROKE ROAD # 600 PEMBROKE PINES, FL 33023	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	DATE 06/12/07
<small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	

Filing Fee is \$61.25 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOHNSON, HEADLEY G 2200 NW 107TH STREET MIAMI, FL 33167
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JOHNSON, CONSTANCE 2200 NW 107TH STREET MIAMI, FL 33167
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS SCOTT, LAWRENCE 1737 NW 59ST MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JOHNSON, ROSALYN 8800 NW 32 CT MIAMI, FL 33147
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000766392 06/19/07-80001-010 70.00

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: 	Date 06/12/07 Daytime Phone #
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	

PH-305-764-4282