2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008915

FILED Sep 07, 2005 Secretary of State

Entity Name: DAMASCUS ROAD BAPTIST CHURCH OF MIAMI INC.

New Principal Place of Business: Current Principal Place of Business: 591 NORTHWEST 194 STREET MIAMI, FL **Current Mailing Address: New Mailing Address:** 591 NORTHWEST 194 STREET MIAMI, FL FEI Number: 51-0480572 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPICER, FRANKIN D REV. 591 NORTHWEST 194 STREET MIAMI, FL 33169 US 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SPICER, FRANKLIN D REV. Name: Name: 591 NORTHWEST 194 STREET Address: Address: City-St-Zip: MIAMI, FL 33169 US City-St-Zip: Title: () Delete Title: () Change () Addition SPICER, CARRIE N Name: Name: Address: 591 NORTHWEST 194 STREET Address: City-St-Zip: MIAMI, FL 33169 US City-St-Zip: Title: SEC () Delete Title: () Change () Addition ROBERTS, HEZE L Name: Name: 591 NORTHWEST 194 STREET Address: Address: City-St-Zip: MIAMI, FL 33169 US City-St-Zip: Title: () Delete Title: (X) Change () Addition MATLOCK, LÍNDA Name: Name: MATLOCK, LINDA 8800 NW 22ND AVE 8707 NW 22ND AVE Address: Address: City-St-Zip: MIAMI, FL 33147 City-St-Zip: MIAMI, FL 33147 Title: () Delete Title: (X) Change () Addition JOHNSON, DWIGHT JOHNSON, DWIGHT Name: Name: 8707NW 22ND AVE 8800 NW 22ND AVE Address: Address: City-St-Zip: MIAMI, FL 33147 City-St-Zip: MIAMI, FL 33147 Title: () Delete Title: (X) Change () Addition WILSON, DEBRA ROBERTS, CARRIE Name: Name: Address: 8800 NW 22ND AVE Address: 8707 NW 22ND AVE MIAMI, FL 33147 MIAMI, FL 33147 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANKLIN SPICER PRES 09/07/2005