

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Feb 11, 2009**  
**Secretary of State**

DOCUMENT# N06000012269

**Entity Name:** LOGOS BAPTIST CHURCH INC.**Current Principal Place of Business:**16305 NW 48TH AVE.  
MIAMI GARDENS, FL 33014**New Principal Place of Business:****Current Mailing Address:**16305 NW 48TH AVE.  
MIAMI GARDENS, FL 33014**New Mailing Address:****FEI Number:** 20-5951708**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**SPIEGEL & UTRERA, PA  
1840 SW 22ND STREET  
MIAMI, FL 33145 US**Name and Address of New Registered Agent:**

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:**

Title: PD ( ) Delete  
Name: BUTLER, KEITH S SR.  
Address: 16305 NW 48 AVENUE  
City-St-Zip: MIAMI GARDENS, FL 33014 US

Title: VD ( ) Delete  
Name: COFFEY, DONALD  
Address: 16305 NW 48 AVENUE  
City-St-Zip: MIAMI GARDENS, FL 33014 US

Title: SD ( ) Delete  
Name: BONDS, GLORIA  
Address: 16305 NW 48 AVENUE  
City-St-Zip: MIAMI GARDENS, FL 33014 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: JONES, CAROLYN  
Address: 16305 NW 48 AVENUE  
City-St-Zip: MIAMI GARDENS, FL 33014 US

Title: BM ( ) Change (X) Addition  
Name: MASHACK, DIANE  
Address: 16305 NW 48 AVENUE  
City-St-Zip: MIAMI GARDENS, FL 33014 US

Title: BM ( ) Change (X) Addition  
Name: BRIMBERRY, JAMES  
Address: 16305 NW 48 AVENUE  
City-St-Zip: MIAMI GARDENS, FL 33014 US

Title: BM ( ) Change (X) Addition  
Name: LAWRENCE, HERMINIA  
Address: 16305 NW 48 AVENUE  
City-St-Zip: MIAMI GARDENS, FL 33014 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: KEITH BUTLER

PD

02/11/2009

Electronic Signature of Signing Officer or Director

Date