

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 21, 2009  
Secretary of State**

DOCUMENT# N08291

Entity Name: CORAL VILLA BAPTIST CHURCH

**Current Principal Place of Business:**

3201 SW 67TH AVE.  
MIAMI, FL 33155

**New Principal Place of Business:**

**Current Mailing Address:**

3201 SW 67TH AVE.  
MIAMI, FL 33155

**New Mailing Address:**

7860 SW 21 TERRACE  
MIAMI, FL 33155

FEI Number: 59-0879133

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TULP, MARJORIE  
3201 S.W. 67 AVE.  
MIAMI, FL 33155 US

**Name and Address of New Registered Agent:**

TULP, MARJORIE  
7860 SW 21 TERRACE  
MIAMI, FL 33155 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:

03/21/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ESCALONA, GUILLERMO PD  
Address: 7860 S.W. 21 TERR  
City-St-Zip: MIAMI, FL 33155

Title: VD ( ) Delete  
Name: SLADE CHRISTINE D.,  
Address: 6081 SW 17 ST  
City-St-Zip: MIAMI, FL 33155

Title: SD ( ) Delete  
Name: TULP, MARJORIE E.,  
Address: 2980 SW 68 AVE.  
City-St-Zip: MIAMI, FL 33155

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

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

Title: VD (X) Change ( ) Addition  
Name: SLADE, CHRISTINE D  
Address: 6081 SW 17 ST  
City-St-Zip: MIAMI, FL 33155

Title: SD (X) Change ( ) Addition  
Name: TULP, MARJORIE E  
Address: 2980 SW 68 AVE.  
City-St-Zip: MIAMI, FL 33155

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: GUILLERMO ESCALONA

PD

03/21/2009

Electronic Signature of Signing Officer or Director

Date