


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

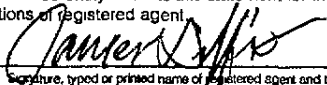
FILED
Sep 03, 2004 08:00 AM
Secretary of State

DOCUMENT # N12341	
1. Entity Name GREATER PEACE MISSIONARY BAPTIST CHURCH OF OPA LOCKA, FLORIDA, INC.	

Principal Place of Business 20820 N.W. 34TH AVENUE OPA LOCKA, FL 33056	Mailing Address 20820 N.W. 34TH AVENUE OPA LOCKA, FL 33056
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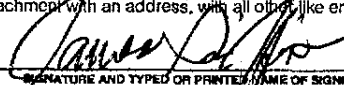
2. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
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6. Name and Address of Current Registered Agent GRIFFIN, JAMES 19525 N.W. 38TH COURT CAROL CITY, FL 33055	
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3. 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  DP	DATE 08/31/04

Filing Fee is \$61.25 Due by September 8, 2004	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	DP GRIFFIN, JAMES 19525 NW 38 CT CAROL CITY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SPENCER, PAUL E. 2772 NW 212 ST CAROL CITY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT PROCTOR, EDGAR 20820 NW 34 AVE OPA LOCKA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 08/31/04 DAYTIME PHONE # 3056245869



08232004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2633005	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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09/03/04-80001-007 61.25