## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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

DOCL	M	ENIT	# N	21	290
DCC	JIVI		77 I N	4	200

1. Entity Name

SIERRA NORWOOD CALVARY BAPTIST CHURCH, INC.



Principal Place of Business

DO NOT WRITE IN THIS SPACE

495 NW 191 ST. MIAMI, FL 33169 Mailing Address 495 NW 191 ST. MIAMI, FL 33169



02152007 No Chg-NP

CR2E037 (4/06)

. FEI Num	ber	Applied For
_59-27	41911 _	Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEDGISTER, REV. RICHARD 14690 SW 41ST ST MIRAMAR, FL 33027

## DO NOT WRITE IN THIS SPACE

				•			
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 Signature, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE							
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Finan- Trust Fund Contribution.	cing 🔲	\$5.00 May Be Added to Fees			
10.	10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-SI-ZIP	CEO LEDGISTER, REV. RICHARD 14690 SW 41ST ST MIAMAR, FL						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HENRY, MICHELLE A 3048 MISSONHOOD LANE 32D MIRAMAR, FL 33025				000000641760 03/01/07-80013-006 70.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DONOVAN, EARLE 610 NW 187TH ST MIAMI, FL 33169			DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DIXON, LOURIS 7721 GRANDVIEW BLVD HOLLYWOOD, FL 33023			IN '	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MONES, MONICA 9261 NW 18 ST PEMBROKE PINES, FL	,					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOURIS, DIXON 7721 GRANDVIEW BLVD MIRAMAR, FL			·			
12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes I further certify that the information							

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 ooth; that I am an officer or director of the corporation or the report of 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 attackment of the corporation and attackment of the corporation of the corpor

SIGNATURE:

WIRE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb. 16, 2007

(305) 652-7336.