FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 21 AM 9:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N35030 (8)

1. Corporation Name
NEW SOLID ROCK MISSIONARY BAPTIST CHURCH INC.

Principal Place of Business	Mailing Address
9028 NW 22 AVE. MIAMI FL 33147	9026 NW 22 AVE. MIAMI FL 33147

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/02/1989
3a. Date of Last Report: 04/19/1994
4. FEI Number: 65-0156479 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

2. Principal Place of Business (21) | 2a. Mailing Address (26)
Suite, Apt. #, etc. (22) | Suite, Apt. #, etc. (27)
City & State (23) | City & State (28)
Zip (24) Country (25) | Zip (29) Country (30)

9. Name and Address of Current Registered Agent

PITTS SR, MARVIN C.
1332 NW 188TH TER
MIAMI FL 33169

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City **FL** 35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	C	1.1 TITLE	Secretary	☐ Change ☒ Addition
NAME	DYSON, JESSIE	1.2 NAME	Nettie L.Pitts	
STREET ADDRESS	18430 NW 29 CT	1.3 STREET ADDRESS	13332 N.W.188 Terr.	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	Miami,Fla.33169	
TITLE	VS	2.1 TITLE	Director	☐ Change ☒ Addition
NAME	FLOWERS, PRUDENCE	2.2 NAME	Georgia Mae Gooden	
STREET ADDRESS	1790 NW 90 ST	2.3 STREET ADDRESS	1360 N.E.157 St.	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	Miami,Fla.33162	
TITLE	PD	3.1 TITLE		☐ Change ☐ Addition
NAME	FLOWERS, ONZIE	3.2 NAME		
STREET ADDRESS	1790 NW 90TH ST	3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP		
TITLE	D	4.1 TITLE		☐ Change ☐ Addition
NAME	PITTS, MARVIN	4.2 NAME		
STREET ADDRESS	9207 NW 22 AVE.	4.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP		
TITLE	T	5.1 TITLE		☐ Change ☐ Addition
NAME	REED, ADDIE	5.2 NAME		
STREET ADDRESS	2000 NW 92ND ST	5.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	5.4 CITY-ST-ZIP		
TITLE	M	6.1 TITLE		☐ Change ☐ Addition
NAME	DYSON, ARTHUR	6.2 NAME		
STREET ADDRESS	15920 NW 21 AVE	6.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Marvin Pitts - MARVIN PITTS - DIRECTOR 4/17/94 305-655-2025
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

604776