

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37501

FILED
Apr 23, 2009
Secretary of State

Entity Name: GRACE BAPTIST CHURCH OF NORTH MIAMI, INC.

Current Principal Place of Business:

1200 NW 7TH AVE.
P.O. BOX 681844
N. MIAMI, FL 331681844

New Principal Place of Business:

14300 WEST DIXIE HIGHWAY.
MIAMI, FL 33161

Current Mailing Address:

1200 NW 7TH AVE.
P.O. BOX 681844
N. MIAMI, FL 331681844

New Mailing Address:

14300 WEST DIXIE HIGHWAY.
P.O. BOX 681844
MIAMI, FL 33161

FEI Number: 65-0190040

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOMINIQUE4, LUC
1075 NW 127 ST
N. MIAMI, FL 33168 US

Name and Address of New Registered Agent:

DOMINIQUE4, LUC
1075 NW 127 ST
N. MIAMI, FL 33168 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: LUC DOMINIQUE

04/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DOMINIQUE, LUC
Address: 1075 NW 127 ST
City-St-Zip: MIAMI, FL 33168

Title: SD () Delete
Name: ALCINDOR, BERNADIN
Address: 384 NE 87 ST
City-St-Zip: MIAMI, FL 33168

Title: TD () Delete
Name: PROPHETE, RICARD
Address: 190 NW 101 ST.
City-St-Zip: MIAMI SHORES, FL 33150

Title: D () Delete
Name: LIMONE, JOSEPH
Address: 12 NE 89 ST.
City-St-Zip: EL PORTAL, FL 331383048

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: DEBE, MARIE
Address: 705 NE 70 ST
City-St-Zip: MIAMI, FL 33138

Title: D (X) Change () Addition
Name: KERSAINT, IGNAS
Address: 400 NW 106 ST
City-St-Zip: MIAMI SHORES, FL 33150

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: LUC DOMINIQUE

PD

04/23/2009

Electronic Signature of Signing Officer or Director

Date