

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

Mar 22, 2004 08:00 AM
Secretary of State

DOCUMENT # N41642

1. Entity Name
THE BODY OF CHRIST NATIONAL CONVENTION, INC.



Principal Place of Business
**58 N.W. 46TH ST.
MIAMI, FL 33127**

Mailing Address
**58 N.W. 46TH ST.
MIAMI, FL 33127**



01082004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0246572

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fees Required**

6. Name and Address of Current Registered Agent

**WATSON, JOSEPH E
2310 NW 58TH STREET
MIAMI, FL 33142**

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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, typed 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, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000094199
03/22/04-80049-018 61.25

10. OFFICERS AND DIRECTORS

TITLE	DV
NAME	WILLIAMS, DELLA
STREET ADDRESS	58 N.W. 46TH ST.
CITY-ST-ZIP	MIAMI, FL
TITLE	DS
NAME	DAVIS, DELORIS
STREET ADDRESS	2405 N.W. 160TH ST.
CITY-ST-ZIP	OPA-LOCKA, FL
TITLE	DP
NAME	WATSON, JOSEPH
STREET ADDRESS	6200 S.W. 62 ST.
CITY-ST-ZIP	SOUTH MIAMI, FL
TITLE	D
NAME	SAVARY, JENNIFER
STREET ADDRESS	4945 S W 41 ST
CITY-ST-ZIP	HOLLYWOOD, FL 33023
TITLE	DT
NAME	BRAITHWAITE, WILLE BELL
STREET ADDRESS	18415 NW 23RD CT
CITY-ST-ZIP	MIAMI, FL 33056

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IN THIS SPACE**

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: *Deloris Davis* **DELORIS DAVIS**

3/19/04

305 961-9002