2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N41642 1. Entity Name THE BODY OF CHRIST NATIONAL CONVENTION, INC.



FILED Apr 01, 2005 8:00 am Secretary of State

04-01-2005 90016 029 ****61.25 Principal Place of Business Mailing Address 58 N.W. 46TH ST. 40044466 58 N.W. 46TH ST. MIAMI, FL 33127 MIAMI, FL 33127 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02232005 Cha-NP CR2E037 (10/03) 4. FEI Number 65-0246572 Applied For City & State City & State Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WATSON, JOSEPH E Street Address (P.O. Box Number is Not Acceptable) 2310 NW 58TH STREET MIAMI, FL 33142 Zip Code City 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 DATE Stgnature, typed or printed name of registered agent and title if applicable. (NOTE>Registered Agent signature required when reinstating) Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Added to Fees Due by May 1, 2005 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. עמ Change ☐ Addition TITLE TITLE ☐ Delete NAME WILLIAMS, DELLA NAME STREET ADDRESS STREET ADDRESS 58 N.W. 46TH ST. CITY-ST-ZIP MIAMI, FL CITY-ST-ZIP TITLE ☐ Delete TITLE . ☐ Addition DAVIS, DELORIS NAME 2405 N.W. 160TH ST. STREET ADDRESS STREET ADDRESS OPA-LOCKA, FL CITY-ST-ZIP CITY-ST-ZIP X Change ☐ Addition TITLE DP ☐ Delete TITLE NAME WATSON, JOSEPH NAME STREET ADDRESS STREET ADDRESS 6200 S.W. 62 ST. CITY-ST-ZIP CITY-ST-ZIP SOUTH MIAMI, FL ☐ Change ☐ Addition Delete TITLE TITLE NAME SAVARY, JENNIFER .. NAME STREET ADDRESS STREET ADDRESS 4945 S W 41 ST HOLLYWOOD, FL 33023 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE BRAITHWAITE, WILLE BELL NAME NAME STREET ADDRESS 18415 NW 23RD CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33056 Addition Defete ☐ Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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.