

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra S. Northing
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N43737 (8)

1. Corporation Name

NEW BIRTH BAPTIST CHURCH, INC.

Principal Place of Business

13230 NW 7TH AVE.
N. MIAMI FL 33168-2804
US

Mailing Address

13230 NW 7TH AVE.
N. MIAMI FL 33168-2804
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/05/1991

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0269611

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

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

7. Nonprofit with IRS 501(c)(3)

☐

**\$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

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2b. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**JOHNSON, STEPHANYE
13230 NW 7TH AVE.
C/O NEW BIRTH BAPTIST CHURCH
MIAMI FL 33168**

10. Name and Address of New Registered Agent

81 Name

Williams, Vernita C.

82 Street Address (P.O. Box Number is Not Acceptable)

13230 NW 7th Avenue

83

84 City

Miami

FL

85 Zip Code

33168

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 **Vernita C. Williams**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

April 29, 1995

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**PD
CURRY, VICTOR T.
5335 NW 188 ST
MIAMI FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**VD
MCKINNEY, JOHN
18825 NW 83RD CT.
MIAMI LAKES FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**SD
KELLY, PEGGY
3201 NW 174TH ST.
MIAMI FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**VD
KELLY, JOHN
5454 FLETCHER ST
HOLLYWOOD FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**D
BRYANT, MAE
1000 NW 151ST ST.
MIAMI FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

☐ Change ☐ Addition

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

☐ Change ☐ Addition

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

☐ Change ☐ Addition

**Jackson, Brenda
13230 NW 7th Avenue
Miami, FL 33168**

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

☐ Change ☐ Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

☐ Change ☐ Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change ☐ Addition

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)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Victor J. Curry**

Signature and typed or printed name of signing officer or director

April 29, 1995 805-685-3706

Date

Daytime Phone #