FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION . **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 20 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

NEW B	BIRTH BAPTIST CHURCH, I	NC.		:								
Principal Place	e of Business	Mailing A	ddress)		
13230 NW 7TH N. MIAMI FL 33 US		13230 NW N. MIAMI	13230 NW 7TH AVE. N. MIAMI FL 33168-2804 US									
							3	3. Date Incorporated or Qualified 06/05/1991		ate of Last R 05/01/199		
21	lace of Business	2a. Mailing Address 26					4	I. FE! Number 65-0269611		Applied For Not Applicable		
Suite, Apt.		Suite, Apt. #, etc.						5. Certificate of Status Desired		\$8.75 A		
City & State		City & State					e	 Election Campaign Financing Trust Fund Contribution 	\$5.00 May Be Added to Fees			
Zip	Country	Zip		Co	untry	•	8	This corporation has liability for	intangible	tax under s	. 199.032,	
24	25	29	·-	30		· · · · · · · · · · · · · · · · · · ·			Yes [
	9. Name and Address of Curre	nt Registered A	\gent		ļ.,		10). Name and Address of New R	gistered	Agent		
					81	Name						
WILLIAMS, VERNITA C					82 Street Address (P.O. Box Number is Not Acceptable)				ble)		····	
	w 7th avenue											
	W BORTH BAPTIST CHURCH				83							
MIAMI F	L 3316 8				84	City	•			85 Zip (Code	
						,			FL	.		
office or re agent. I as	to the provisions of Sections 617.05(egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 617,150/ e of Florida, Suc rations of, Section	8, Florida Statu th change was on 617.0503. Fl	tes, the a authoriza lorida Sta	above ad by atutes	e-named o the corposit	corporati oration's	on submits this statement for the board of directors. I hereby acce	ourpose of pt the app	changing its ointment as	s registered registered	
SIGNATURE		,										
	Signature, typed or printed name of registered ag		ble (NO	TE: Register	ed Age	ent signature r	roquired who	en reinstating)	DATE			
12.	7	ID DIRECTORS		13.				ADDITIONS/CHANGES TO OFFI	CERS AND		S IN 12	
TITLE	PD		☐ DELETE	1.11	ITLE					☐ Change	Addition	
NAME	CURRY, VICTOR T.			1.21	MAME							
STREET ADDRESS	5335 NW 188 ST			1.3 5	STREET	ADDRESS						
CITY-ST-ZIP	MIAMI FL		T berese		CITY-S	T- 2IP						
TITLE	VD		☐ DELETE	2.1 T						L Change	Addition	
NAME	MCKINNEY, JOHN				AME							
STREET ADDRESS	18825 NW 83RD CT.					ADDRESS						
CITY-ST-ZIP	MIAMI LAKES FL		DELETE		CITY-S	S1-ZIP						
TITLE	SD IACKCON BOTHDA		☐ DECE IE	3.1 T						L Change	L_] Addition	
NAME	JACKSON, BRENDA	13230 NW 7TH AVENUE			3.2 NAME 3.3 STREFT ADDRESS							
STREET ADDRESS	MIAMI FL											
CITY-ST-ZIP TITLE	VD VD		DELETE	3.4. I 4.1 T	CHTY-S	ST-ZIP				Change	Addition	
NAME	KELLY, JOHN		Officer							C. Criange	LI AUGILION	
STREET ADDRESS	5454 FLETCHER ST				NAME	ADDRESS						
CITY-ST-ZIP	HOLLYWOOD FL											
TITLE	D		DELETE	5.1 1	HILE	1-20-				☐ Change	Addition	
NAME	BRYANT, MAE				IAME	.				C Change	L.J Addition	
STREET ADDRESS	1000 NW 151ST ST.					ADDRESS						
CITY-ST-ZIP	MIAMI FL											
TITLE	TELEVITIE T IN	·	DELFTE	6.1 T	HTY-S	1-211"				☐ Change	Addition	
NAME					IAME						Addition	
STREET ADDRESS						ADDRESS						
CITY OF TID				0.3 8	uncel	VDUUE99						

14. I do hereby certify that the information supplied with this filling 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 eath; 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 atlachment with an address.