FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # N45330

1. Corporation Name

(0)

BROWNSVILLE BAPTIST CHURCH OF MIAMI, INC.

Principal Place of Business Mailing Address 2775 NW 60TH STREET MIAMI FL 33142 Miami FL 33142 Miami FL 33142									
						3. Date incorporated or Qualified 09/26/1991	3a. Date of Las 04/26/1		
_2. Principal P 21	Place of Business	2a. Mailing Address		-		4. FEI Number 59-2525056		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Certificate of Status Desired	\$8.7	Not Applicable 5 Additional	
City & Stat	'e	City & State						Required	
23		28				Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees	
Žφ	Country	Zip				This corporation has liability for interest.			
24	0. Name and Address of Curre	29				Florida Statutes			
	9. Name and Address of Curre	int registered Agent		B1	Name	10. Name and Address of New Reg	stered Agent		
ANDEDO	ON PEDMADO		'	"	Name				
ANDERSON, BERNARD 18541 NW 8 ROAD			1	82 Street Address (P.O. Box Number is Not Acceptable)					
MIAMI FI			1	B3					
				_					
			1		City			ip Code	
familiar wi	ith, and accept the obligations of, Sec Signature, typed or printed name of registered agen	otion 617.0503, Florida Sta		жро	ration's board	tion submits this statement for the purport of directors. I hereby accept the appoint	tment as registere	d agent. I am	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE		ORS IN 12	
TITLE	P DE		ELETE 1.1 TITL				☐ Change	Addition	
NAME	ANDERSON, BERNARD 18541 NW 8TH RD	13\$		1.2 NAME 1.3 STREET ADDRESS					
STREET ADDRESS	MIAMI FL								
CITY-ST-ZIP TITLE	VD	DELETE	1.4 CITY - ST - ZIP		- ZIP		F-7		
NAME	WRIGHT, WILLIAM		1	2 1 TITLE 2 2 NAME			Change	Addition	
STREET ADDRESS	2940 N.W 66TH ST.		2 3 STRE	-	NADECC .				
CITY-ST-ZIP	MIAMI FL 33142		2 4 011)					ļ	
TITLE	TD	DELETE			-211		Change	Addition	
NAME	HALSELL, PATRICIA		3 2 NAM	Ε			<u></u>		
STREET ADDRESS	17130 NW 19TH AVE		3 3 STRE	ET AI	DDRESS				
CITY-ST-ZIP	OPA LOCKA FL 33056		3.4. CITY	(-\$T-	- ZIP				
TITLE	SD CORDAN FORDA	DELETE	4.1 TITLE				Change	Addition	
NAME	JORDAN, FREDA		4 2 NAV	Æ					
STREET ADDRESS	2265 NW 93RD TERR MIAMI FL		4 3 STRE	ET A	DDRESS				
CITY-ST-ZIP TITLE	D D	Проти	44 CITY		ZIP				
NAME	MASONI MILLIE I		5 1 TITLE				☐ Change	☐ Addition	
STREET ADDRESS	2640 N.W. 106TH ST.		5 2 NAM		annece				
CITY-ST-ZIP	MIAMI FL		53 STRE		ľ				
TITLE	D	DELETE	5.4 CITY - 6.1 TITLE		ZIF		☐ Change	Addition	
NAME	WHITE, FREDDIE		6.2 NAM8				□ onange	☐ Madition	
STREET ADDRESS	16415 N.W. 27TH COURT		6.3 STRE		ODRESS				
CITY-ST-ZiP	OPA LOCKA FL 33054		6.4 City]				

14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Fiorida 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 cath, that I am an officer or director of the corporation or the feceiver 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 phanged, or on an artachment with an aderess.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/96

305-634-6104 Daytime Prione II