FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 PM 10:12

DOCUMENT # N94000003165 (7)

1. Corporation Name

CATHEDRAL OF FAITH MISSIONARY BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
1609 NW 7TH TERRACE FORT LAUDERDALE FL 33311	1609 NW 7TH TERRACE FORT LAUDERDALE FL 33311

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/22/1994
3a. Date of Last Report: 6-23-1993

F.E.I. # 650506351

(M)

Applied For
Not Applicable

2. Principal Place of Business — 21
2a. Mailing Address — 26

Suite, Apt. #, etc — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required

8. *This corporation has liability for intangible tax under S. 199.032.* Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

KELLEY, WILLIE E REV.
1609 NW 7TH TERRACE
FORT LAUDERDALE FL 33311

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☐ Change ☐ Addition
NAME	KELLEY, WILLIE E REV	12 NAME	
STREET ADDRESS	1609 NW 7TH TERRACE	13 STREET ADDRESS	
CITY ST ZIP	FORT LAUDERDALE FL 33111	14 CITY ST ZIP	
TITLE	ST	21 TITLE	☐ Change ☐ Addition
NAME	FLETCHER, OPHELIA	22 NAME	
STREET ADDRESS	762 NW 117TH STREET	23 STREET ADDRESS	
CITY ST ZIP	MIAMI FL	24 CITY ST ZIP	
TITLE	T)	31 TITLE	☐ Change ☐ Addition
NAME	RAYMOND TANNER	32 NAME	
STREET ADDRESS	11786 S.W 196 ST	33 STREET ADDRESS	
CITY ST ZIP	MIA. FLA. 33177	34 CITY ST ZIP	
TITLE	T)	41 TITLE	☐ Change ☐ Addition
NAME	DELLA MAE PLEZ	42 NAME	
STREET ADDRESS	12120 N.W 20 CT	43 STREET ADDRESS	
CITY ST ZIP	MIA FL. 33167	44 CITY ST ZIP	
TITLE	~~VICE~~ CT)	51 TITLE	☐ Change ☐ Addition
NAME	DONELLA TURNER	52 NAME	
STREET ADDRESS	3710 N.W 169 TER.	53 STREET ADDRESS	
CITY ST ZIP	MIA. FL. 33055	54 CITY ST ZIP	
TITLE	T)	61 TITLE	☐ Change ☐ Addition
NAME	MARILYN NELSON	62 NAME	
STREET ADDRESS	3942 N.W 176 TERR.	63 STREET ADDRESS	
CITY ST ZIP	MIA. FL. 33055	64 CITY ST ZIP	

REMITTED BY MAY 1.

H DEPOSITED BY BANK

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)(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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ophelia Fletcher Ophelia Fletcher 4-30-95 305-687-0533
SIGNATURE AND TYPED OR PRINTED NAME OF BIDDING OFFICER OR DIRECTOR — Date — Daytime Phone Number

0000606