

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N94000003165 (7)

1. Corporation Name

CATHEDRAL OF FAITH MISSIONARY BAPTIST CHURCH, IN
C.



Principal Place of Business

Mailing Address

1609 NW 7TH TERRACE
FORT LAUDERDALE FL 33311

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FORT LAUDERDALE FL 33311

3. Date Incorporated or Qualified
06/22/1994

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0506351

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE
NAME KELLEY, WILLIE E REV
STREET ADDRESS 1609 NW 7TH TERRACE
CITY-ST-ZIP FORT LAUDERDALE FL 33111

1.1 TITLE V.P. ☐ Change ☒ Addition
1.2 NAME TULLIS, Alex REV
1.3 STREET ADDRESS 6301 S.W. 35th
1.4 CITY-ST-ZIP MIRAMAR, FLA 33023

TITLE ST ☐ DELETE
NAME FLETCHER, OPHELIA
STREET ADDRESS 762 NW 117TH STREET
CITY-ST-ZIP MIAMI FL

2.1 TITLE TR ☐ Change ☒ Addition
2.2 NAME YOUNG, ALFRED
2.3 STREET ADDRESS 3261 N.W. 170 ST
2.4 CITY-ST-ZIP MIAMI, FLA 33054

TITLE TR ☒ DELETE
NAME TANNER, WAYMON
STREET ADDRESS 11785 SW 186 ST.
CITY-ST-ZIP MIAMI FL 33177

3.1 TITLE TR ☐ Change ☒ Addition
3.2 NAME NEWMAN, VERNITA
3.3 STREET ADDRESS 3549 N.W. 97 ST
3.4 CITY-ST-ZIP MIAMI, FLA 33147

TITLE TR ☐ DELETE
NAME TURNER, DONELLA
STREET ADDRESS 3710 NW 169 TERR.
CITY-ST-ZIP MIAMI FL 33055

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE TR ☐ DELETE
NAME NELSON, MARILYN
STREET ADDRESS 3942 NW 176 TERR
CITY-ST-ZIP MIAMI FL 33055

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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)(k), 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, upon an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)