

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Jul 23 1996 8:00 am
Secretary of State

DOCUMENT # N95000001928 (9)

1. Corporation Name

LAKEVIEW BETHANIE BAPTIST CHURCH, INC.

Principal Place of Business

11500 N.W. 17TH AVENUE
MIAMI FL 33168

Mailing Address

P. O. BOX 680308
MIAMI FL 33168

3. Date Incorporated or Qualified

04/14/1995

3a. Date of Last Report

08/02/95

2. Principal Place of Business

2a. Mailing Address

21 11500 NW 17 TH. AV.

26 P.O. BOX 680308

4. FEI Number

65-0599598

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 MIAMI FL 33168

28 MIAMI FL. 33168

24 Zip 33168

25 Country DADE

29 Zip 33168

30 Country DADE

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOSEPH, RIGOBERT V
1685 N.W. 123RD ST.
MIAMI FL 33167

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 signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME PRESIDENT
STREET ADDRESS REV. PAUL MERIUS CASSEUS
CITY-ST-ZIP 573 NW.95Ter. Miami FL 33150

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME Paul Merius Casseus
1.3 STREET ADDRESS 573 NW 95 Terrace
1.4 CITY-ST-ZIP Miami, FL 33150

TITLE ☐ DELETE
NAME V. President.
STREET ADDRESS Rev. RIGOBERT JOSEPH
CITY-ST-ZIP 1665 NW.123 St. Miami FL 33167

2.1 TITLE T ☐ Change ☒ Addition
2.2 NAME MARIE S LAGUERRE
2.3 STREET ADDRESS 1100NW 127 St.
2.4 CITY-ST-ZIP Miami, FL 33168

TITLE ☒ DELETE
NAME Chairman
STREET ADDRESS WILLIAM PICAR
CITY-ST-ZIP 3965 NW 171 Ter
Miami, FL 33055

3.1 TITLE T ☐ Change ☒ Addition
3.2 NAME O DASSE THERAMENE
3.3 STREET ADDRESS 1926NW 83 Ter.
3.4 CITY-ST-ZIP MIAMI FL 33147

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE T ☐ Change ☒ Addition
4.2 NAME HENRI LASSEUR
4.3 STREET ADDRESS 9736 NW 26 AVE
4.4 CITY-ST-ZIP MIAMI FL 33147

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME 200001901892
5.3 STREET ADDRESS -07/23/96--00000--000
5.4 CITY-ST-ZIP ***13.75 01086--001

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME 700001901892
6.3 STREET ADDRESS -07/23/96--01086--000 002
6.4 CITY-ST-ZIP ***61.25

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, 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: *Rigobert V. Joseph*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)