

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002141

FILED  
Jun 07, 2007  
Secretary of State

Entity Name: PINES BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

800 NW 102 AVE  
PEMBROKE PINES, FL 33026 US

**New Principal Place of Business:**

**Current Mailing Address:**

800 NW 102 AVE  
PEMBROKE PINES, FL 33026 US

**New Mailing Address:**

FEI Number: 65-0407614      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

BORGSTROM, KATHERINE  
800 NW 102 AVENUE  
PEMBROKE PINES, FL 33026 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: TD ( ) Delete  
Name: DAYE, PHILIP  
Address: 9820 SHERIDAN STREET #108  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VPD ( ) Delete  
Name: DEMAURO, WILLIAM  
Address: 1230 NW 92ND AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: PD ( ) Delete  
Name: CROMER, GARY  
Address: 11734 SW 53 CT  
City-St-Zip: COOPER CITY, FL 32331

Title: S ( ) Delete  
Name: YOUMANS, DIANE  
Address: 1661 NW 96TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33024

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: TD (X) Change ( ) Addition  
Name: BLIZZARD, PEGGY  
Address: 15873 WEST WIND CIRCLE  
City-St-Zip: SUNRISE, FL 33326

Title: VPD (X) Change ( ) Addition  
Name: CIDEL, JEAN  
Address: 20456 NW 8TH COURT  
City-St-Zip: MIAMI, FL 33169

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHERINE BORGSTROM

AGEN

06/07/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date