

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001947

FILED
Apr 15, 2005
Secretary of State

Entity Name: CARIBBEAN BAPTIST CHURCH INC.

Current Principal Place of Business:

3800 S. DOUGLAS ROAD
MIRAMAR, FL 33025 US

New Principal Place of Business:

Current Mailing Address:

3800 S. DOUGLAS ROAD
MIRAMAR, FL 33025 US

New Mailing Address:

FEI Number: 65-0679051

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GREEN, WESLEY G
9501 CHELSEA DR.
MIRAMAR, FL 33025 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: P () Delete
Name: GRAHAM, ALRIC
Address: 720 NW 85TH WAY
City-St-Zip: PEMBROKE PINES, FL

Title: D () Delete
Name: KERR, ANDREA
Address: 10021 SW 14TH ST
City-St-Zip: PEMBROKE PINES, FL

Title: D () Delete
Name: PENNICOOK, PAUL
Address: 19020 SW 4TH ST
City-St-Zip: PEMBROKE PINES, FL

Title: D () Delete
Name: SHAW, ELROY MR
Address: 1396 SW 180TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: CEO () Delete
Name: GREEN, WESLEY
Address: 9501 CHELSEA DR
City-St-Zip: MIRAMAR, FL

Title: T () Delete
Name: NUGENT, GENEVIEVE
Address: 2433 CENTERGATE DR, APT. 102
City-St-Zip: MIRAMAR, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: T (X) Change () Addition
Name: NUGENT, GENEVIEVE
Address: 15812 SW 51 ST
City-St-Zip: MIRAMAR, FL 33027

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANDREA KERR

D

04/15/2005

Electronic Signature of Signing Officer or Director

Date