


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2008 08:00 AM
Secretary of State

DOCUMENT # N96000001947 1. Entity Name CARIBBEAN BAPTIST CHURCH INC.	
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Principal Place of Business 3800 S. DOUGLAS ROAD MIRAMAR, FL 33025 US	Mailing Address 3800 S. DOUGLAS ROAD MIRAMAR, FL 33025 US
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DO NOT WRITE IN THIS SPACE



01222008 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0679051	Applied For Not Applicable
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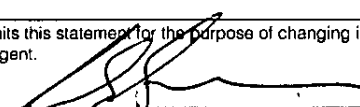
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

GREEN, WESLEY G
9501 CHELSEA DR.
MIRAMAR, FL 33025

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  DATE 01/25/08

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

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GRAHAM, ALRIC 720 NW 85TH WAY PEMBROKE PINES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREEN, DEAN 13176 SW 24TH ST MIRAMAR, FL 33025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PENNICOOK, PAUL 19020 SW 4TH ST PEMBROKE PINES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHAW, ELROY MR 1396 SW 180TH AVENUE PEMBROKE PINES, FL 33029
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO GREEN, WESLEY 9501 CHELSEA DR MIRAMAR, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T NUGENT, GENEVIEVE 15812 SW 51 ST MIRAMAR, FL 33027

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U00000802719
02/04/08-80010-018 70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  01/25/08 954-442-7477

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #