

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 17, 2005 8:00 am
Secretary of State

03-17-2005 90015 050 ****61.25

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1. Entity Name

LAEL BAPTIST CHURCH, INC.



Principal Place of Business

337 SW 13TH STREET
DANIA BEACH FL 33004

Mailing Address

337 SW 13TH STREET
DANIA BEACH FL 33004

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



1st MOORE

CR2E037 (10/04)

4. FEI Number

65-0640169

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DALRYMPLE, REV. ESAU
337 SW 13TH STREET
DANIA BEACH FL 33004

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

Due By: May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PP	<input type="checkbox"/> Delete
NAME	DALRYMPLE, REV. ESAU	
STREET ADDRESS	220 S.W. 21ST WAY	
CITY-ST-ZIP	FORT LAUDERDALE FL	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	BROWN, RAINFORD C	
STREET ADDRESS	2181 N.W. 84TH WAY	
CITY-ST-ZIP	SUNRISE FL	
TITLE	APD	<input type="checkbox"/> Delete
NAME	COES, LOUISE	
STREET ADDRESS	2313 N.W. 14TH COURT	
CITY-ST-ZIP	FORT LAUDERDALE FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	ROBBINS, MR. ANDREWS	
STREET ADDRESS	2885 S.W. 10TH STREET	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE	DT	<input type="checkbox"/> Delete
NAME	JOHNSON, RAPHAEL	
STREET ADDRESS	2836 S.W. 4TH COURT	
CITY-ST-ZIP	FORT LAUDERDALE FL	
TITLE	DT	<input type="checkbox"/> Delete
NAME	PINNOCK, STEPHANIE	
STREET ADDRESS	3821 N.W. 4TH COURT	
CITY-ST-ZIP	FORT LAUDERDALE FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mrs. Anne Fraser	
STREET ADDRESS	1518 N.W. 14th Court	
CITY-ST-ZIP	Ft Lauderdale, FL 33311	
TITLE	Youth Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mrs. Catline Sutherland	
STREET ADDRESS	4249 N.W. 52nd Ave.	
CITY-ST-ZIP	Lauderdale Lakes, FL 33319	
TITLE	Church Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mrs. Dorothy M. Nelson	
STREET ADDRESS	7358 N.W. 48th St.	
CITY-ST-ZIP	Lauderhill, FL 33319	
TITLE	Deacon	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mr. Andrew Robbins	
STREET ADDRESS	2885 S.W. 10th St.	
CITY-ST-ZIP	Ft Lauderdale, FL 33312	
TITLE	WMU President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mrs. Alice Swan	
STREET ADDRESS	821 S.W. 2nd St	
CITY-ST-ZIP	Ft Lauderdale, FL 33312	
TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ms. Janette Walters	
STREET ADDRESS	4320 N.W. 4th St	
CITY-ST-ZIP	Plantation, FL 33317	

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Esau Dalrymple
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 5, 2005
Date Daytime Phone #