

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-07-2004 90016 026 ****78.75

2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # N96000006300			
1. Entity Name CHRISTIAN BAPTISTE CHURCH OF CANAAN, INC.			
Principal Place of Business 5880 NE 4TH AVE MIAMI, FL 33137		Mailing Address 213 N.E. 107TH STREET MIAMI, FL 33161	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number NOT APPLICABLE		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	
OSLER, JOSEPH 213 NE 107 ST. MIAMI, FL 33161		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 _____ (NOTE: Registered Agent's signature required when reappointing) DATE _____			
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DESENTANT, JOSEPH 314 NE 115 ST. MIAMI, FL 33161 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PASTOR TONY-M. ACCIUS 14925 NE 6 place, miami FL 33161 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SALVADOR, MARIE 110 NW 136 ST. MIAMI, FL 33168 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVEL-JEUNE GENS 790 NW 140 TERRACE MIAMI FL 33161 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOSEPH, OSLER 213 NE 107 ST. MIAMI, FL 33161 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JOSEPH, MARIE C. 213 NE 107 ST. MIAMI, FL 33161 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR OUIDE, OGE 711 NE 137 ST. MIAMI, FL 33161 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SALVADOR, ULRICK 1110 NW 136 ST. MIAMI, FL 33168 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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: <i>Joseph Osler</i>		4/19/04	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	