

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000498

FILED
Apr 30, 2009
Secretary of State

Entity Name: FIRST BAPTIST CHURCH OF BROWNSVILLE AUXILLARY, INC.

Current Principal Place of Business:

4600 NW 23RD AVE
MIAMI, FL 33142 US

New Principal Place of Business:

Current Mailing Address:

4600 NW 23RD AVE
MIAMI, FL 33142 US

New Mailing Address:

FEI Number: 65-0088152

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROOKS, OVERTON
4600 NW 23RD AVE
MIAMI, FL 33142 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: PD () Delete
Name: MCGEE, KENNETH
Address: 4600 NW 23RD AVE
City-St-Zip: MIAMI, FL 33142 US

Title: TR () Delete
Name: CURRY, CHARLE L
Address: 3410 NW 210TH TER
City-St-Zip: MIAMI, FL 33056 US

Title: TD () Delete
Name: SMITH, JAMES
Address: 4600 NW 23RD AVE
City-St-Zip: MIAMI, FL 33142 US

Title: CB () Delete
Name: MITCHELL, SR, RICKEY
Address: 8080 NW 22ND AVE
City-St-Zip: MIAMI, FL 33147 US

Title: SD () Delete
Name: COLLINS JR, WALTER
Address: 1255 NW 90TH STREET
City-St-Zip: MIAMI, FL 33150

Title: VD () Delete
Name: LEWIS, CLAUDIA J
Address: 2354 NW 86TH TER
City-St-Zip: MIAMI, FL 33147

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: () 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: CLAUDIA J. LEWIS

VD

04/30/2009

Electronic Signature of Signing Officer or Director

Date