


**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N98000002315</b> 1. Entity Name GOSPEL VISION MISSIONARY BAPTIST CHURCH, INC.	
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Principal Place of Business C/O 1890 OPALOCKA BLVD OPA LOCKA, FL 33054	Mailing Address 130 NW 36TH STREET 130 MIAMI, FL 33127
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**DO NOT WRITE IN THIS SPACE**



04182007 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0834023	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

FORBES, RUFUS N REV.  
C/O 1890 OPALOCKA BLVD  
OPA LOCKA, FL 33054

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IN THIS SPACE**

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 signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FORBES, RUFUS N REV. 450 N.E. 68TH STREET MIAMI, FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WHYTE, CAROL 3791 NW 197TH TERR MIAMI, FL 33189
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CS PITON, MARTINE 1232 SESQUINE STREET OPA LOCKA, FL 33054
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PR NEAT, BETTY 130 NW 86-ST MIAMI, FL 33150
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PRATT, DEAN 3210 SW 66TH TERRACE MIRAMAR, FL 33023
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FORBES, MARCIA 1001 NW 167TH ST MIAMI, FL 33168

U00000746794  
05/16/07-80082-017 61.25

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IN THIS SPACE**

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:**  **4-24-07** **954-547-4725**

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