

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 30, 2009  
Secretary of State**

DOCUMENT# N98000005311

Entity Name: ST. THOMAS MISSIONARY BAPTIST CHURCH OF MIAMI, INC.

**Current Principal Place of Business:**

6321 N.W. 22ND. AVE.  
MIAMI, FL 33147

**New Principal Place of Business:**

**Current Mailing Address:**

6321 N.W. 22ND. AVE.  
MIAMI, FL 33147

**New Mailing Address:**

FEI Number: 65-0869766      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

THOMAS, ROBERT P  
2245 N.W. 99 TERR.  
MIAMI, FL 33147      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: THOMAS, REV ROBERT P  
Address: 2245 NW 99 TERR  
City-St-Zip: MIAMI, FL 33147

Title: ST      ( ) Delete  
Name: BOGES, VIRGINIA  
Address: 1836 NW 55 TERRACE  
City-St-Zip: MIAMI, FL 33142

Title: T      ( ) Delete  
Name: EDMOND, HELEN D  
Address: 5360 NW 168 TERR  
City-St-Zip: OPA LOCKA, FL 33055

**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:

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: REV. ROBERT P. THOMAS

PD

03/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date