

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700930

FILED
Mar 26, 2015
Secretary of State
CC7259073895

Entity Name: ANTIOCH MISSIONARY BAPTIST CHURCH OF BROWNSVILLE - MIAMI, FLORIDA, INCORPORATED

Current Principal Place of Business:

2799 NORTHWEST 46TH STREET
MIAMI, FL 33142

Current Mailing Address:

ANTIOCH M.B. CHURCH
P.O. BOX 471016
MIAMI, FL 33247

FEI Number: 74-2894755

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LENO, CALVIN SR.
1681 NW 195TH STREET
MIAMI, FL 33169 US

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

Officer/Director Detail :

Title PRESIDENT
Name TANKS, THOMAS
Address 2799 NW 46TH STREET
City-State-Zip: MIAMI FL 33142

Title VP
Name LENO, CALVIN DAVID SR.
Address 2799 NW 46TH STREET
City-State-Zip: MIAMI FL 33142

Title D
Name WALDEN, ANDY
Address 2799 NW 46 STREET
City-State-Zip: MIAMI FL 33142

Title D
Name LOVETT, LARRIE M III
Address 2799 NW 46 STREET
City-State-Zip: MIAMI FL 33142

Title TREASURER
Name MARTIN, CAROLYN
Address 2110 NW 81ST TERR.
City-State-Zip: MIAMI FL 33147

Title D
Name LENO, JAMES ARTHUR
Address 2799 NW 46 STREET
City-State-Zip: MIAMI FL 33142

Title D
Name ROUSE, FELPH
Address 2799 NW 46 STREET
City-State-Zip: MIAMI FL 33142

Title SECRETARY
Name THURSTON, MONICA
Address 2799 NW 46 STREET
City-State-Zip: MIAMI FL 33142

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I hereby 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 all other like empowered.

SIGNATURE: JAMES A. LENO

DIRECTOR

03/26/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name JACKSON, MACK
Address 2799 NW 46 STREET
City-State-Zip: MIAMI FL 33142

Title D
Name ASHLEY, CECIL
Address 2799 NW 46 STREET
City-State-Zip: MIAMI FL 33142

Title D
Name WRIGHT, MCKINLEY
Address 2799 NW 46 STREET
City-State-Zip: MIAMI FL 33142