

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N38517

**Entity Name:** MYRTLE GROVE PRESBYTERIAN CHURCH, INC.

**Current Principal Place of Business:**

2961 NW 175 ST  
MIAMI GARDENS, FL 33056-4046

**Current Mailing Address:**

P.O. BOX 693906  
MIAMI GARDENS, FL 33269

**FEI Number: 65-0197894**

**Certificate of Status Desired: Yes**

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

LOVELL-MARTIN, BARBARA B MRS  
7873 S. SILVERADO CIRCLE  
HOLLYWOOD, FL 33024 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: BARBARA B. LOVELL-MARTIN**

**03/10/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PT  
Name LOVELL-MARTIN, BARBARA BLYTHE  
Address 7873 S. SILVERADO CIRCLE  
City-State-Zip: DAVIE FL 33024

Title TRUSTEE  
Name WALTERS, CLARENCE  
Address 17102 N.W. 9TH COURT  
City-State-Zip: MIAMI GARDENS FL 33169

Title TT  
Name MINDINGALL, LUCILLE  
Address 2961 N.W. 175 ST STREET  
City-State-Zip: MIAMI FL 33056

Title TRUSTEE  
Name BRUTON, TOMMY  
Address 11298 N.W. 21ST COURT  
City-State-Zip: MIAMI FL 33167

Title SECRETARY  
Name ROGERS, WARREN A  
Address 1845 N.W. 185TH TERRACE  
City-State-Zip: MIAMI GARDENS FL 33055

Title TRUSTEE  
Name HOPWOOD, IONIE  
Address 2961 NW 175 STREET  
City-State-Zip: MIAMI GARDENS FL 33056

*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: BARBARA BLYTHE LOVELL-MARTIN**

**PRESIDENT**

**03/10/2017**

Electronic Signature of Signing Officer/Director Detail

Date