

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44039

Entity Name: DAYSPRING MISSIONARY BAPTIST CHURCH CENTER, INC.**Current Principal Place of Business:**2991 NW 62ND STREET
MIAMI, FL 33147**Current Mailing Address:**2991 NW 62ND STREET
MIAMI, FL 33147**FEI Number: 65-0424210****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**ROAN, MICHAEL
2991 N.W. 62 ST.
MIAMI, FL 33147 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 S
Name ROAN, MICHAEL REV.
Address 2991 NW 62ND STREET
City-State-Zip: MIAMI FL 33147

Title PASTOR
Name ROAN , MICHAEL
Address 2991 NW 62ND STREET
City-State-Zip: MIAMI FL 33147

Title TRUSTEE
Name BAILEY, WILLIEMAE
Address 2991 NW 62ND STREET
City-State-Zip: MIAMI FL 33147

Title EXECUTIVE SECRETARY
Name SWAIN-ROLLE, PATCINA
Address 2991 NW 62ND STREET
City-State-Zip: MIAMI FL 33147

Title CHAIRMAN
Name MOORE, ROBERT J
Address 2991 NW 62ND STREET
City-State-Zip: MIAMI FL 33147

Title T
Name AMICA, LOUIS
Address 2991 NW 62ND STREET
City-State-Zip: MIAMI FL 33147

Title TRUSTEE
Name THOMAS, BETTY M
Address 2991 NW 62ND STREET
City-State-Zip: MIAMI FL 33147

Title DEACON
Name MILLER, LOUIS
Address 2991 NW 62ND STREET
City-State-Zip: MIAMI FL 33147

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: ANN BROWN**FINANCIAL SECRETARY****01/18/2015**

Electronic Signature of Signing Officer/Director Detail

Date