Entity Name: FIRST BORN AGAIN BAPTIST CHURCH OF NORTH MIAMI BEACH, INC.	Secretary of State CC4287665677
Current Principal Place of Business:	
15395 N. MIAMI AVE NORTH MIAMI BEACH, FL 33169	
Current Mailing Address:	
15395 N. MIAMI AVE NORTH MIAMI BEACH, FL 33169 US	
FEI Number: 65-0375062 Certifica	te of Status Desired: No
Name and Address of Current Registered Agent:	
JULES, FRITZNER 31 NE 152 ST	

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9200000584

MIAMI, FL 33162 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	FRITZNER JULES			04/01/2016	
	Electronic Signature of Registered Agent			Date	
Officer/Dired	ctor Detail :				
Title	PD	Title	D		
Name	JULES, FRITZNER	Name	GEFFRARD, EUGENE		
Address	31 NE 152 ST	Address	6470 NW 27 ST		
City-State-Zip:	MIAMI FL 33162	City-State-Zip:	MIRAMAR FL 33025		
Title	D	Title	SECRETAIRE		
Name	JOSEPH , LOVENS	Name	BEAUVAIS, JOHAM		
Address	1224 NE 111 ST	Address	1801 NW 183 STREET		
City-State-Zip:	MIAMI FL 33161	City-State-Zip:	MIAMI GARDEN FL 33056		
Title	D	Title	TREASURER		
Name	ST. JEAN, PIERRELA	Name	JULIEN, BENNJY		
Address	18970 SW 6E CT	Address	9999 SUMMER BREEZE		
City-State-Zip:	MIAMI FL 33169	City-State-Zip:	SUNRISE FL 33323		
Title	CO-TRUSTEE	Title	CONSELOR		
Name	DECIME, CLAUDE	Name	AUGUSTIN, GREGORY		
Address	645 IVES DIARY RD	Address	1360 NE 204TER		
	212	City-State-Zip:	MIAMI FL 33179		
City-State-Zip:	MIAMI FL 33179	Continues of	Continues on page 2		

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: FRITZNER JULES

SENIOR PASTOR

04/01/2016

FILED Apr 01, 2016

Electronic Signature of Signing Officer/Director Detail

Date

## **Officer/Director Detail Continued :**

Title	ADMINISTRATOR	Title	VP
Name	NAISSANCE, WHIDLET	Name	JOSEPH, INNOCENT
Address	1600 NE 135TH STREET 1003	Address	8272 NE 2ND AVE, STE D MIAMI FL 33138
City-State-Zip:	NORTH MIAMI FL 33181	City-State-Zip.	WIAWI FE 33130