Signature of authorized officer or agent

DEPARTMENT OF ENERGY, LABOR & ECONOMIC GROWTH NONPROFIT CORPORATION INFORMATION UPDATE



2009

ue October		ation name				
77108	HADT		AL BAPTIST CHURC	H OF DETROIT, MICHIGA	AN	
REV. C	HARLES G. A	DAMS	RECEIV	1		
	OIT MI 48235		\$20 SEP 2		FILED	
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he address of th	e registered office			- Salar Salar Salar	Suredii of Commercial Services	
	AMES COUZE IT MI 48235	NS DR.	*			
X Departmen	nt, and that no ch	anges have occurre	ed in required informati	tify that all directors' names on since the last filed report	and addresses are previously file.	ed with the
If you checked the box, proceed to ite Mailing address of registered office in Michigan (may be a P.O.			be a P.O. Box)	2	. Resident Agent	9211
				1		
. The address o	f the registered off	ce in Michigan (a P.(O. Box may not be design	aled as the address of the regi	stered office)	
			O. Box may not be design		stered office)	
. Describe the p	ourpose and activiti	es of the corporation				
. Describe the p		es of the corporation		y this report:		
. Describe the p	ourpose and activiti	es of the corporation		y this report:		
Describe the p	ourpose and activities NAI President (Required)	es of the corporation		y this report:		
Describe the p	NAI President (Required) Secretary (Required)	es of the corporation		y this report:		
Describe the p	NAI President (Required) Secretary (Required)	es of the corporation		y this report:		
Describe the p	NAN President (Required) Secretary (Required) Treasurer (Required)	es of the corporation		y this report:		
Describe the particle of the p	NAI President (Required) Secretary (Required) Treasurer (Required) Vice President Director (Required)	es of the corporation		y this report:		
5. If different than President Required 3 or more directors (3 different individuals) 6. Report Filing for	NAM President (Required) Secretary (Required) Vice President Director (Required) Director (Required) Director (Required) Director (Required)	es of the corporation	Please mak Return to:	BUSINESS OR RESIDEN	ayable to the State of Michigan.	

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