

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001684

FILED
Jan 28, 2008
Secretary of State

Entity Name: SILVER PALM METHODIST CHURCH, INC.

Current Principal Place of Business:

15855 SW 248TH ST
HOMESTEAD, FL 33031

New Principal Place of Business:

Current Mailing Address:

15855 SW 248 ST
HOMESTEAD, FL 33031 US

New Mailing Address:

FEI Number: 59-0993588

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D'AZEVEDO, JAMES
24545 SW 192ND AVE
HOMESTEAD, FL 33031 US

Name and Address of New Registered Agent:

MCLEOD, THOMAS H
15855 SW 248 ST.
HOMESTEAD, FL 33031 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: THOMAS H MCLEOD

01/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JENSEN, ROBERT
Address: 18640 SW 295 TERR
City-St-Zip: HOMESTEAD, FL 33031

Title: D () Delete
Name: HOAK, GREG
Address: 13305 SW 232 ST
City-St-Zip: MIAMI, FL 33170

Title: D () Delete
Name: MCALLISTER, EUGENE
Address: 19411 SW 308 ST
City-St-Zip: HOMESTEAD, FL 33030

Title: CD () Delete
Name: D'AZEVEDO, JAMES
Address: 24545 SW 192 AVE
City-St-Zip: HOMESTEAD, FL 33031

Title: D () Delete
Name: CROSS, MARGARET
Address: 11235 SW 166 TERR
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: APPLEBY, MYRA
Address: 17970 SW 272 ST
City-St-Zip: HOMESTEAD, FL 33031

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: D'AZEVEDO, JAMES
Address: 24545 SW 192 AVE
City-St-Zip: HOMESTEAD, FL 33031

Title: CD (X) Change () Addition
Name: MCLEOD, THOMAS H
Address: 15855 SW 248 ST.
City-St-Zip: HOMESTEAD, FL 33031

Title: D (X) Change () Addition
Name: BRASWELL, DOYLR
Address: 18300 SW 248 ST.
City-St-Zip: HOMESTEAD, FL 33031

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS H MCLEOD

CD

01/28/2008

Electronic Signature of Signing Officer or Director

Date