

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700051

FILED
Apr 18, 2006
Secretary of State

Entity Name: ST. PAUL'S METHODIST CHURCH OF NORTH MIAMI, FLORIDA, INC.

Current Principal Place of Business:

900 N E 132 STREET
NORTH MIAMI, FL 331614119

New Principal Place of Business:

Current Mailing Address:

900 N E 132 STREET
NORTH MIAMI, FL 331614119

New Mailing Address:

FEI Number: 59-0818927

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUNNINGHAM, STEVEN
1040 N.E. 121 STREET
BISCAYNE PARK, FL 33161 US

Name and Address of New Registered Agent:

KING, JAMES
13865 N. W. 5 AVE.
NORTH MIAMI, FL 33168 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: JAMES KING

04/18/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CANTA, LORITO
Address: 1415 NE 141 STREET
City-St-Zip: NORTH MIAMI, FL

Title: D () Delete
Name: KING, JAMES
Address: 13865 N. W. 5 AVE.
City-St-Zip: NORTH MIAMI, FL 33168

Title: D () Delete
Name: MORGAN, SHIRLEY
Address: 527 N.W. 95 TERRACE
City-St-Zip: N MIAMI, FL 33150

Title: D () Delete
Name: ANDERSON, DAVID
Address: 536 NE 132 STREET
City-St-Zip: N MIAMI, FL

Title: D (X) Delete
Name: CUNNINGHAM, STEVEN
Address: 1040 N.E. 121 STREET
City-St-Zip: BISCAYNE PARK, FL 33161

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES KING

D

04/18/2006

Electronic Signature of Signing Officer or Director

Date