

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702758

FILED
Mar 17, 2009
Secretary of State

Entity Name: ST. JOHN LUTHERAN CHURCH OF MIAMI SHORES, FLORIDA, INC.

Current Principal Place of Business:

10390 NE 2ND AVE
MIAMI SHORES, FL 33138

New Principal Place of Business:

Current Mailing Address:

10390 NE 2ND AVE
MIAMI SHORES, FL 33138

New Mailing Address:

FEI Number: 59-6522047

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARC-CHARLES, JEAN-PIERRE F REV.
10390 NE 2ND AVENUE
MIAMI SHORES, FL 33138 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: JOSEPH, NIKYE
Address: 9427 WEST MCNAB #207
City-St-Zip: TAMARAC, FL 33321

Title: P () Delete
Name: OLIVIER, ARIANE E
Address: 8601 NE 2ND AVENUE
City-St-Zip: MIAMI, FL 33138

Title: D () Delete
Name: CAMEAU, JOSETTE
Address: 240 W 15TH ROAD, NO. 107
City-St-Zip: MIAMI, FL 33129

Title: D () Delete
Name: LOPS, MAGALLI
Address: 400 NW 131 STREET
City-St-Zip: NORTH MIAMI, FL 33168

Title: VP () Delete
Name: BRUTUS, ELIZABETH
Address: 13655 NE 10TH AVENUE
City-St-Zip: NORTH MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: MOREAU, LINDA-
Address: 20521 NW 10TH AVENUE
City-St-Zip: MIAMI GARDENS, FL 33169

Title: P (X) Change () Addition
Name: DORANGE, KETLINE
Address: 1820 NW 192ND STREET
City-St-Zip: MIAMI GARDENS, FL 33056

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 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: JEAN-PIERRE F. MARC-CHARLES

PAST

03/17/2009

Electronic Signature of Signing Officer or Director

Date