

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008 8:00 am
Secretary of State

04-07-2008 90042 015 ****61.25

DOCUMENT # 710484

1. Entity Name
**WILLIAM'S MEMORIAL CHRISTIAN METHODIST
EPISCOPAL CHURCH, INC.**



Principal Place of Business
**646 NW 13TH TERRACE
FT. LAUDERDALE, FL 33311**

Mailing Address
**PO BOX 8643
FORT LAUDERDALE, FL 33310**

4000012



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03012008 Chg-NP CR2E037 (12/06)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCCOMBS, CHERLY E
1746 NW 55 AVE 101
LAUDERHILL, FL 33313**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee Is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME MCKINNEY, ROSCOE C REV ☒ Delete
STREET ADDRESS 646 N.W. 13TH TERRACE
CITY-ST-ZIP FT. LAUDERDALE, FL

TITLE TR
NAME THORNTON, MARJESTER ☐ Delete
STREET ADDRESS 1800 NW 24TH TERRACE
CITY-ST-ZIP FT. LAUDERDALE, FL

TITLE TR
NAME FOEMAN, FRANKIE ☐ Delete
STREET ADDRESS 1650 NW 26TH TERRACE
CITY-ST-ZIP FORT LAUDERDALE, FL 33311

TITLE TR
NAME HAMP DAVIS ☐ Delete
STREET ADDRESS 1485 N.W. 33 AVENUE
CITY-ST-ZIP FT. LAUDERDALE, FL

TITLE TR
NAME BAILEY, GLORIA ☐ Delete
STREET ADDRESS 7299 NW 49TH CT
CITY-ST-ZIP LAUDERHILL, FL

TITLE TR
NAME MCNAIR, MOSES ☐ Delete
STREET ADDRESS 3761 NW 25TH ST
CITY-ST-ZIP LAUDERDALE LAKES, FL 33311

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition
NAME LUE JR., MARVIN CHARLES
STREET ADDRESS 646 N.W. 13TH TERRACE
CITY-ST-ZIP FT. LAUDERDALE, FL 33311

TITLE TR ☐ Change ☒ Addition
NAME FOSTER, MARY ALICE
STREET ADDRESS 419 N.W. 15TH TERRACE
CITY-ST-ZIP FT. LAUDERDALE, FL 33311

TITLE TR ☐ Change ☒ Addition
NAME THOMAS, BENNY
STREET ADDRESS 1445 N.W. 34th Ct.
CITY-ST-ZIP FT. LAUDERDALE, FL 33311

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Cheryl F. McCombs

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-30-08

Date

(954) 484-4044

Daytime Phone #