

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710484

FILED  
Apr 29, 2009  
Secretary of State

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

**Current Principal Place of Business:**

646 NW 13TH TERRACE  
FT. LAUDERDALE, FL 33311

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 8643  
FORT LAUDERDALE, FL 33310

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCCOMBS, CHERLY E  
1746 NW 55 AVE 101  
LAUDERHILL, FL 33313 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: PD ( ) Delete  
Name: LUE, JR, MARVIN C  
Address: 646 N.W. 13TH TERRACE  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: TR ( ) Delete  
Name: THORNTON, MARJESTER  
Address: 1800 NW 24TH TERRACE  
City-St-Zip: FT. LAUDERDALE, FL

Title: TR ( ) Delete  
Name: FOEMAN, FRANKIE  
Address: 1650 NW 26TH TERRACE  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: TR ( ) Delete  
Name: HAMP DAVIS  
Address: 1485 N.W. 33 AVENUE  
City-St-Zip: FT. LAUDERDALE, FL

Title: TR ( ) Delete  
Name: BAILEY, GLORIA  
Address: 7299 NW 49TH CT  
City-St-Zip: LAUDERHILL, FL

Title: TR ( ) Delete  
Name: MCNAIR, MOSES  
Address: 3761 NW 25TH ST  
City-St-Zip: LAUDERDALE LAKES, FL 33311

**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:

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: CHERLY MCCOMBS

RA

04/29/2009

Electronic Signature of Signing Officer or Director

Date