2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2008
Secretary of State

DOCUMENT# 714163

Entity Name: GAMBLE MEMORIAL CHURCH OF GOD IN CHRIST, INC.

Current Principal Place of Business:

1898 NORTHWEST 43RD STREET
MIAMI, FL 331424744

New Principal Place of Business:

Current Mailing Address:

1898 NORTHWEST 43RD STREET
MIAMI, FL 331424744

New Mailing Address:

FEI Number: 23-8714163 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JACKSON, JULIAN C
16922 NORTHWEST 83RD AVENUE
MIAMI LAKES, FL 33016 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:	JACKSON, JULIAN C	
Address:	16922 NW 83RD AVE	
City-St-Zip:	MIAMI LAKES, FL 33016	
Title:	D	( ) Delete
Name:	JACKSON, EUGENE W	
Address:	5040 NW 5TH AVE	
City-St-Zip:	MIAMI, FL 33127	
Title:	T	( ) Delete
Name:	MOZONE, PETER SR	
Address:	3271 NW 171 ST	
City-St-Zip:	MIAMI, FL 33056	
Title:	S	( ) Delete
Name:	JOHNSON, BERTHA J	
Address:	2911 NW 174TH ST	
City-St-Zip:	MIAMI, FL 33056	
Title:	D	( ) Delete
Name:	MCCLEOD, CECIL SR	
Address:	3341 NW 182ND ST	
City-St-Zip:	MIAMI, FL 33056	
Title:	D	( ) Delete
Name:	STIRRUP, CHARLES A SR	
Address:	16531 NW 18TH COURT	
City-St-Zip:	MIAMI, FL 33055	

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: JULIAN C. JACKSON PD 03/30/2008

Electronic Signature of Signing Officer or Director — Date