

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720664

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: PLYMOUTH BRETHREN MIAMI GOSPEL CHAPEL, INC.

**Current Principal Place of Business:**

10900 NW 19 AVE  
MIAMI, FL 33167 US

**New Principal Place of Business:**

**Current Mailing Address:**

10900 NW 19 AVE  
MIAMI, FL 33167 US

**New Mailing Address:**

FEI Number: 23-7356261      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BRENNAN, LUIE  
19930 N.W. 8TH STREET  
PEMBROKE PINES, FL 33029 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: BRYAN, HOPETON  
Address: 1901 NW 105 AVE  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: VPD ( ) Delete  
Name: BEACH, JONATHAN  
Address: 18505 NW 5 COURT  
City-St-Zip: MIAMI, FL 33160

Title: TD ( ) Delete  
Name: BRENNAN, LUIE  
Address: 19930 NW 8 STREET  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: SD ( ) Delete  
Name: CHAMBERS, SOLOMAN  
Address: 10367 SW 207 TERRACE.  
City-St-Zip: MIAMI, FL 33189

Title: VTD ( ) Delete  
Name: GARVIS, EVERTON  
Address: 1270 NW 208 TERRACE  
City-St-Zip: MIAMI, FL 33179

**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 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: LUIE BRENNAN

TD

04/20/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date