2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#722304

FILED Mar 19, 2009 Secretary of State

Entity Name: PALMETTO PRESBYTERIAN CHURCH OF MIAMI, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
6790 S.W. MIAMI, FL					
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
6790 S.W. MIAMI, FL					
FEI Number:	59-0904152	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
	OLANDA 17TH TERRA 331782084 L				
	named entity of Florida.	submits this statement for the	purpose of changing its register	red office or registered agent, or both,	
SIGNATUF	RE:				
	Electro	nic Signature of Registered Ac	gent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name:	P (MESA, ENRIQ 14241 SW 38		Title: Name:	() Change () Addition	
Address: City-St-Zip:	MIAMI, FL 33		Address: City-St-Zip:		
City-St-Zip: Title: Name: Address:	MIAMI, FL 33) Delete DRA Y ГН AVENUE		()Change ()Addition	
	MIAMI, FL 33 S (GOMEZ, SANE 6415 SW 107 MIAMI, FL 33	175) Delete DRA Y IH AVENUE 173) Delete NDA H TERR.	City-St-Zip: Title: Name: Address:	() Change () Addition () Change () Addition	
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	MIAMI, FL 33° S (GOMEZ, SANE 6415 SW 107° MIAMI, FL 33° D (SOLER, YOLA 9449 NW 47Th MIAMI, FL 33°) Delete DRA Y TH AVENUE 173) Delete NDA H TERR. 178) Delete ETA 4 ST #64	City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	.,,	

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: YOLANDA SOLER D 03/19/2009