

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723559

FILED  
Sep 01, 2009  
Secretary of State

Entity Name: ST. THOMAS CHURCH OF GOD IN CHRIST, INC.

**Current Principal Place of Business:**

1400 DIVISION AVENUE  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 4492  
WEST PALM BEACH, FL 334024492

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

FLETCHER, SOLOMON  
1005 NW 12TH STREET  
FT. LAUDERDALE, FL 33311 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: E ( ) Delete  
Name: FLETCHER, SOLOMON PASTOR  
Address: 1005 NW 12 STREET  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: E ( ) Delete  
Name: CAMPBELL, THEOPHILUS  
Address: 1400 DIVISION AVE  
City-St-Zip: WEAT PALM BEACH, FL 33401

Title: E ( ) Delete  
Name: BOONE, SAMUEL  
Address: 4938 CARIBBEAN BLVD  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: M ( ) Delete  
Name: HAMPTON, TALISA  
Address: 401 EXECUTIVE CTR DR., #C106  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: SM ( ) Delete  
Name: JONES, JENNIE V  
Address: 1016 INDIAN TRACE, APT. #107  
City-St-Zip: RIVIERA BEACH, FL 33407

**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: SOLOMON FLETCHER

Electronic Signature of Signing Officer or Director

ELDE

09/01/2009

Date