


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2008 08:00 A
Secretary of State

DOCUMENT # 730069
 1. Entity Name
 ST. JAMES BAPTIST CHURCH OF COCONUT GROVE, INC.



Principal Place of Business 3500 CHARLES AVENUE MIAMI, FL 33133-5714	Mailing Address 3500 CHARLES AVENUE MIAMI, FL 33133-5714
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DO NOT WRITE IN THIS SPACE



03172008 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0212093	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 JACOBS, SR, EDWARD
 C/O ST. JAMES BAPTIST CHURCH
 3500 CHARLES AVENUE
 MIAMI, FL 33133-5714

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Edward Jacobs Sr.* DATE: 3-18-08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCCLAIN, ABRAHAM SR. 3903 CHARLES TERRACE MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACOBS, EDWARD SR 3453 CHARLES AVENUE MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HAMILTON, KAREN 2400 EAST PERSERVE WAY, #301 MIRAMAR, FL 33025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TT LINDSAY, EDWARD 14800 ROBINSON ST MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 04/08/08-80038-009 70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Edward Jacobs Sr.* DATE: 3-18-08 305-943-4440

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #