

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730069

FILED  
Mar 30, 2009  
Secretary of State

Entity Name: ST. JAMES BAPTIST CHURCH OF COCONUT GROVE, INC.

**Current Principal Place of Business:**

3500 CHARLES AVENUE  
MIAMI, FL 331335714

**New Principal Place of Business:**

**Current Mailing Address:**

3500 CHARLES AVENUE  
MIAMI, FL 331335714

**New Mailing Address:**

FEI Number: 65-0212093      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

JACOBS, SR, EDWARD  
C/O ST. JAMES BAPTIST CHURCH  
3500 CHARLES AVENUE  
MIAMI, FL 331335714 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: MCCLAIN, ABRAHAM SR.  
Address: 3903 CHARLES TERRACE  
City-St-Zip: MIAMI, FL 33133

Title: D ( ) Delete  
Name: JACOBS, EDWARD SR  
Address: 3453 CHARLES AVENUE  
City-St-Zip: MIAMI, FL 33133

Title: SD ( ) Delete  
Name: HAMILTON, KAREN  
Address: 2400 EAST PERSERVE WAY, #301  
City-St-Zip: MIRAMAR, FL 33025

Title: TT ( ) Delete  
Name: LINDSAY, EDWARD  
Address: 14800 ROBINSON ST  
City-St-Zip: MIAMI, FL 33176

**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:

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: ABRAHAM MCCLAIN, SR.

PD

03/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date