

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736580

FILED
Jan 28, 2009
Secretary of State

Entity Name: SAINT MATTHEW COMMUNITY MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

ST MATTHEW CMB CHURCH
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

3616 DAY AVE.
MIAMI, FL 33133

New Mailing Address:

FEI Number: 59-1688186

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEONARD, WILLIE
3616 DAY AVE
MIAMI, FL 33133 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: LEONARD, REV. WILLIE,
Address: 6431 SW 62ND CRT
City-St-Zip: S MIAMI, FL

Title: SD () Delete
Name: CRAHAM, DIANNE
Address: 10220 S.W. 168TH ST
City-St-Zip: MIAMI, FL

Title: TS () Delete
Name: LEONARD, NELVENIA
Address: 6431 S W 62ND COURT
City-St-Zip: MIAMI, FL

Title: MD () Delete
Name: RAINEY, ROBERT JAMES,
Address: 14424 S. W. 105 CT.
City-St-Zip: MIAMI, FL

Title: VTD () Delete
Name: LEONARD, NELVENIA
Address: 6431 SW 62 COURT
City-St-Zip: MIAMI, FL 33143

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: REV. WILLIE LEONARD

PD

01/28/2009

Electronic Signature of Signing Officer or Director

Date