

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2008 8:00 am
Secretary of State

03-06-2008 90050 026 ****61.25

DOCUMENT # 743252

1. Entity Name
PAYNE CHAPEL A.M.E. CHURCH, INC.



Principal Place of Business
**801 9 ST
WEST PALM BEACH, FL 33401 US**

Mailing Address
**801 9 ST
WEST PALM BEACH, FL 33401 US**



01152008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address		4. FEI Number 59-2344181		Applied For <input type="checkbox"/> Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent HARRISON, EUGENE 112 SWAN PARKWAY WEST ROYAL PALM BEACH, FL 33401				7. Name and Address of New Registered Agent			
				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City			
				FL Zip Code			

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 _____ (NOTE: Registered Agent signature required when restate) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	P	<input checked="" type="checkbox"/> Delete		TITLE	P	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	SULLIVAN, SAMUEL E REV			NAME	MILTON Broomfield		
STREET ADDRESS	1370 6TH STREET			STREET ADDRESS	801 - Ninth Street		
CITY - ST - ZIP	WEST PALM BEACH, FL 33401			CITY - ST - ZIP	West Palm Beach, FL 33401		
TITLE	T	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	WARREN, WILLIE J			NAME			
STREET ADDRESS	808 W. 3RD STREET			STREET ADDRESS			
CITY - ST - ZIP	RIVIERA BEACH, FL 33404			CITY - ST - ZIP			
TITLE	S	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	LANIER, DAISY B			NAME			
STREET ADDRESS	1435 7TH STREET			STREET ADDRESS			
CITY - ST - ZIP	WEST PALM BEACH, FL 33401			CITY - ST - ZIP			
TITLE	CTR	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HARRISON, EUGENE			NAME			
STREET ADDRESS	112 SWAN PARKWAY WEST			STREET ADDRESS			
CITY - ST - ZIP	ROYAL PALM BEACH, FL			CITY - ST - ZIP			
TITLE	T	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ANDREWS, FLOYD R			NAME			
STREET ADDRESS	4288 WAVERLY DR.			STREET ADDRESS			
CITY - ST - ZIP	WEST PALM BEACH, FL 33407			CITY - ST - ZIP			
TITLE	C	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	CUMMINGS, LOVETT			NAME			
STREET ADDRESS	1246 26 ST.			STREET ADDRESS			
CITY - ST - ZIP	RIVIERA BEACH, FL 33407			CITY - ST - ZIP			

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: Eugene Harrison 1-23-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #