2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2008
Secretary of State

DOCUMENT# 748123

Entity Name: PALM-LAKES CHURCH OF CHRIST, INC.

Current Principal Place of Business:

4300 PALM AVE
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

4300 PALM AVE
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 59-1932710 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLORES, ANTONIO D
501 NORTH 72 AVNEUE
HOLLYWOOD, FL 33024 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: P ( ) Delete
Name: FLORES, ANTONIO D
Address: 501 NORTH 72 AVENUE
City-St-Zip: HOLLYWOOD, FL 33024

Title: S ( ) Delete
Name: MIRANDA, ALFREDO
Address: 1843 N.W. 34 STREET
City-St-Zip: MIAMI, FL 33142

Title: S ( ) Delete
Name: LOPEZ, MIGUEL A
Address: 515 WEST PARK DRIVE, #2
City-St-Zip: MIAMI, FL 33172

Title: VP ( ) Delete
Name: MATOS, ELIAS
Address: 8903 N.W. 25 AVENUE
City-St-Zip: MIAMI, FL 33147

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: LOPEZ, MIGUEL A DELETE
Address: 515 WEST PARK DRIVE, #2
City-St-Zip: MIAMI, FL 33172

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: ANTONIO D. FLORES P 01/08/2008

Electronic Signature of Signing Officer or Director — Date