

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749999

FILED
Apr 17, 2009
Secretary of State

Entity Name: THE LIVELY STONE CHURCH OF MIAMI, INC.

Current Principal Place of Business:

8025 NW MIAMI CT
MIAMI, FL 33153 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 530922
MIAMI SHORES, FL 33153 US

New Mailing Address:

FEI Number: 59-2295427

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPILL, JOY B., ESQ.
SIMON & SIMON, P.A.
9100 SO DADELAND BLVD., SUITE 504
MIAMI, FL 33156 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: DORISCAR, ESTHER
Address: 211 BRIARWOOD CIRCLE #211
City-St-Zip: HOLLYWOOD, FL 33024

Title: DD () Delete
Name: DORISCAR, JUDE
Address: 211 BRAIRWOOD CIRCLE # 211
City-St-Zip: HOLLYWOOD, FL 33024

Title: SD () Delete
Name: CADEAU, KATSIA
Address: 2320 E PRESERVE WAY # 208
City-St-Zip: MIRAMAR, FL

Title: TD () Delete
Name: ALEXANDRE, RUTH
Address: 4400 HILLCREST DRIVE #212B
City-St-Zip: HOLLYWOOD, FL 33021

Title: DD () Delete
Name: FLEURIUS, JOSEPH
Address: 901 NW 202 STREET
City-St-Zip: MIAMI, FL 33169

Title: VD () Delete
Name: DORISCAR, DAVID
Address: 8962 S HOLLYBROOK BLVD # 208
City-St-Zip: PEMBROKE PINES, FL 33025

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:

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: KATSIA M. CADEAU

SD

04/17/2009

Electronic Signature of Signing Officer or Director

Date