2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#756331

FILED Jan 14, 2009 Secretary of State

Entity Name: UNITY A.M.E. CHURCH AND CEMETERY, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

1013 W DR MARTIN LUTHER KING JR BLVD SEFFNER, FL 33854

Current Mailing Address: New Mailing Address:

5819 LANGSTON DR. 1013 W DR MARTIN LUTHER KING JR BLVD TAMPA, FL 33619 SEFFNER, FL 33854

FEI Number: 59-2060217 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CLARK, PATRICIA CLARK, PATRICIA MS 5819 LÁNGSTON DRIVE 5819 LANGSTON DRIVE TAMPA, FL 33619 TAMPA, FL 33619

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: MS. PATRICIA CLARK 01/14/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition POLK, RICKY A POLK, RICKY A REV. Name: Name:

4300 MEADOW RIDGE AVE Address: 4300 MEADOW RIDGE AVE Address: City-St-Zip: MULBERRY, FL 33860 City-St-Zip: MULBERRY, FL 33860

Title: () Delete Title: () Change () Addition

CLARK, PATRICIA Name: Name: Address: 5819 LANGSTON DRIVE Address: City-St-Zip: TAMPA, FL 33619 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

JACKSON, GREG Name: JACKSON, GREG Name:

10462 BLOOMFIELD HILLS DR 10462 BLOOMFIELD HILLS DR Address: Address: City-St-Zip: SEFFNER, FL 33584 SEFFNER, FL 33584

City-St-Zip:

() Delete Title: Title: () Change () Addition

Name: CREEKMUR, GEORGE Name: 4219 KING ALFRED DR Address: Address: City-St-Zip: TAMPA, FL 33610 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

JACKSON, BETTY JACKSON, GLORIA Name: Name:

10462 BLOOMFIELD HILLS DR 3412 E UNION ST Address: Address:

City-St-Zip: TAMPA, FL 33607 City-St-Zip: SEFFNER, FL 33584

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: PATRICIA CLARK D 01/14/2009