

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764010

FILED
Apr 05, 2009
Secretary of State

Entity Name: HURST CHAPEL AFRICAN METHODIST EPISCOPAL CHURCH OF WINTER HAVEN, FLORIDA, INC.

Current Principal Place of Business:

P.O. BOX 3623
WINTER HAVEN, FL 338813623

New Principal Place of Business:

875 AVE O. NE
WINTER HAVEN, FL 338813623

Current Mailing Address:

P.O. BOX 3623
WINTER HAVEN, FL 338813623

New Mailing Address:

FEI Number: 59-2042618 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

TRAKAS, ANDREW P
123 AVENUE C, S.W.
WINTER HAVEN, FL 33880 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: SD () Delete
Name: HORNE, LOUISE
Address: 2210 5TH STREET NE.
City-St-Zip: WINTER HAVEN, FL 33881

Title: TD () Delete
Name: BRYANT, MATTIE
Address: 1520 6TH COURT N.E.
City-St-Zip: WINTER HAVEN, FL 33881

Title: PD () Delete
Name: CLARK, RONNIE L
Address: 452 TERRANOVA STREET
City-St-Zip: WINTER HAVEN, FL 33884

Title: VCD () Delete
Name: JAMES, KENNETH A
Address: 1315 10TH STREET NE
City-St-Zip: WINTER HAVEN, FL 33881

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: PARRISH, JUDITH
Address: 3100 E. LAKE HARTRIDGE
City-St-Zip: WINTER HAVEN, FL 33881

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: RONNIE L. CLARK

REV.

04/05/2009

Electronic Signature of Signing Officer or Director

Date