

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003403

FILED
Sep 01, 2008
Secretary of State

Entity Name: I AM MINISTRIES OF MIAMI-DADE/BROWARD, INC.

Current Principal Place of Business:

3765 OAK RIDGE LANE
WESTON, FL 33331

New Principal Place of Business:

Current Mailing Address:

3765 OAK RIDGE LANE
WESTON, FL 33331

New Mailing Address:

FEI Number: 90-0100242 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DAWSON, BRENDA P
3765 OAK RIDGE LANE
WESTON, FL 33331 US

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: DAWSON, BRENDA P
Address: 3765 OAK RIDGE LANE
City-St-Zip: WESTON, FL 33331

Title: VP () Delete
Name: WILLIAMS, COREY
Address: 1851 NW 186TH STREET
City-St-Zip: MIAMI, FL 33056

Title: S () Delete
Name: BRANTLEY, MAE
Address: 18701 NW 22ND AVE.
City-St-Zip: MIAMI, FL 33056

Title: T () Delete
Name: INNIS, WILLIE MAE
Address: 17220 NW 64TH AVE.
City-St-Zip: MIAMI LAKES, FL 33015

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:

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: BRENDA P. DAWSON

MRS.

09/01/2008

Electronic Signature of Signing Officer or Director

Date