

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001919

FILED
Apr 07, 2008
Secretary of State

Entity Name: METRO SIDEWALK MINISTRIES, INC.

Current Principal Place of Business:

2820 SHARER ROAD
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5616
TALLAHASSEE, FL 32314

New Mailing Address:

FEI Number: 59-3636525

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAYNE, STEPHEN E REV
2025 DOOMAR DR.
TALLAHASSEE, FL 32308 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: D () Delete
Name: PAYNE, STEPHEN E REV
Address: 2025 DOOMAR DR.
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: PAYNE, BARBARA E
Address: 2025 DOOMAR DR.
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: ROSIER, PEARLY
Address: P O BOX 7384
City-St-Zip: TALLAHASSEE, FL 32314

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:

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: STEPHEN E PAYNE

REV

04/07/2008

Electronic Signature of Signing Officer or Director

Date