

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 22, 2009  
Secretary of State**

DOCUMENT# N00000004577

**Entity Name:** THE CHURCH OF CHRIST WRITTEN IN HEAVEN, OF GOULDS, FLORIDA, INC.

**Current Principal Place of Business:**

11760 SW 20TH ST.  
GOULDS, FL 331702941

**New Principal Place of Business:**

**Current Mailing Address:**

11760 SW 220 STREET  
GOULDS, FL 33170

**New Mailing Address:**

**FEI Number:** 65-1020994      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ADAMS, DANIEL  
12414 SW 259 ST  
HOMESTEAD, FL 33032      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: P      ( ) Delete  
Name: MILLNER-JAMES, CLARA M  
Address: 14720 BUCHANAN ST  
City-St-Zip: MIAMI, FL 33176

Title: T      ( ) Delete  
Name: SHARPE, DOROTHY  
Address: 21811 SW 112TH AVE  
City-St-Zip: MIAMI, FL 33170

Title: D      ( ) Delete  
Name: MITCHELL, ROBERT SR  
Address: 14017 SW 262 LANE # 1  
City-St-Zip: HOMESTEAD, FL 33032

Title: D      ( ) Delete  
Name: ADAMS, JUDITH  
Address: 12414 SW 259TH STREET  
City-St-Zip: HOMESTEAD, FL 33032

**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: D      (X) Change ( ) Addition  
Name: ADAMS, JUDITH E  
Address: 12414 SW 259TH STREET  
City-St-Zip: HOMESTEAD, FL 33032

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: JUDITH E. ADAMS

D

01/22/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date