

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000651

FILED
May 01, 2012
Secretary of State

Entity Name: SHALOM CENTER MINISTRY, INC.

Current Principal Place of Business:

6620 ARLINGTON EXPRESSWAY
6604
JACKSONVILLE, FL 32211

New Principal Place of Business:

Current Mailing Address:

5270 GLENWOOD AVENUE
JACKSONVILLE, FL 32205

New Mailing Address:

FEI Number: 59-3702651

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERVIL, JACQUES REV
8229 JUSTIN RD N
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

MERVIL, JACQUES REV
5270 GLENWOOD AVENUE
JACKSONVILLE, FL 32205 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: JACQUES MERVIL

05/01/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MERVIL, JACQUES
Address: 5270 GLENWOOD AVENUE
City-St-Zip: JACKSONVILLE, FL 32205

Title: TD
Name: MAGALIE, SAINT- PREUX
Address: 3131 UNIVERSITY BLVD
City-St-Zip: JACKSONVILLE, FL 32211

Title: MB
Name: MERVIL, EVELYN
Address: 1021 WESTBROOK CIR W
City-St-Zip: JACKSONVILLE, FL 32209

Title: SD
Name: MERVIL, JOAS
Address: 104 KING ST. #46
City-St-Zip: JACKSONVILLE, FL 32204

Title: D
Name: JIMMY, MERVIL
Address: 5928 FIRESTON RD SUIT 156
City-St-Zip: JACKSONVILLE, FL 32244

Title: D
Name: BONAPARTE, BRUNET
Address: 1801 LANE AVE
City-St-Zip: JACKSONVILLE, FL 32210

I hereby 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 all other like empowered.

SIGNATURE: JACQUES MERVIL

PD

05/01/2012

Electronic Signature of Signing Officer or Director

Date