

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004946

FILED
Aug 10, 2005
Secretary of State

Entity Name: GREATER WARD CHAPEL AFRICAN METHODIST EPISCOPAL CHURCH OF HALLANDALE, FL, INC.

Current Principal Place of Business:

900 N.W. 6TH AVE.
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

900 N.W. 6TH AVE.
PO BOX 4466
HALLANDALE, FL 33008

New Mailing Address:

FEI Number: 20-0163547 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

MCCASLIN, BRENDA D
2936 N.W. 63RD AVE
SUNRISE, FL 33313 US

Name and Address of New Registered Agent:

DAVIS, A.J. REV.
900 N.W. 6TH AVENUE
HALLANDALE, FL 33009 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: REV. A.J. DAVIS

08/10/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SOLOMON, VALERIE
Address: 900 N.W. 6TH AVE.
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: HUDSON, BENJAMIN
Address: 900 N.W. 6TH AVE.
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: FULTON, LORRAINE
Address: 900 N.W. 6TH AVE.
City-St-Zip: HALLANDALE, FL 33009

Title: P () Delete
Name: DAVIS, A.J. REV.
Address: 900 N.W. 6TH AVE.
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change () Addition
Name: SOLOMON, VALERIE
Address: 900 N.W. 6TH AVE.
City-St-Zip: HALLANDALE, FL 33009

Title: MR. (X) Change () Addition
Name: WATKINS, MARK
Address: 900 N.W. 6TH AVE.
City-St-Zip: HALLANDALE, FL 33009

Title: MS. (X) Change () Addition
Name: JOSEPH, PATRICIA
Address: 900 N.W. 6TH AVE.
City-St-Zip: HALLANDALE, FL 33009

Title: MR. (X) Change () Addition
Name: COOPER, RICHARD
Address: 900 N.W. 6TH AVE.
City-St-Zip: HALLANDALE, FL 33009

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: A.J. DAVIS

REV

08/10/2005

Electronic Signature of Signing Officer or Director

Date