

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007123

FILED
Mar 31, 2009
Secretary of State

Entity Name: UPPER ROOM OUTREACH MINISTRIES OF MIAMI, INC.

Current Principal Place of Business:

3800 N.W. 199TH ST.
MIAMI, FL 33055

New Principal Place of Business:

Current Mailing Address:

3800 N.W. 199TH ST.
MIAMI, FL 33055

New Mailing Address:

FEI Number: 56-2389946

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOPER, MARC
3800 N.W. 199TH ST.
MIAMI, FL 33055 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: ED () Delete
Name: COOPER, MARC
Address: 3800 N.W. 199TH ST.
City-St-Zip: MIAMI, FL 33055

Title: SD () Delete
Name: COOPER, JOY
Address: 3800 N.W. 199TH ST.
City-St-Zip: MIAMI, FL 33055

Title: D () Delete
Name: SCOTT, AMY
Address: 3800 N.W. 199TH ST.
City-St-Zip: MIAMI, FL 33055

Title: TD () Delete
Name: JACKSON, TINA
Address: 3800 NW 199TH STREET
City-St-Zip: MIAMI, FL 33055

Title: D () Delete
Name: WILCOX, BOBBY
Address: 2960 NW 164TH STREET
City-St-Zip: MIAMI, FL 33054

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:

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: TINA JACKSON

D

03/31/2009

Electronic Signature of Signing Officer or Director

Date