

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007792

FILED
Feb 01, 2009
Secretary of State

Entity Name: FAMILIES R US COMMUNITY BAPTIST MINISTRIES, INC.

Current Principal Place of Business:

20121 SW 112 PLACE
MIAMI, FL 33189

New Principal Place of Business:

Current Mailing Address:

20121 SW 112 PLACE
MIAMI, FL 33189

New Mailing Address:

FEI Number: 03-0379363

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLIVAN, CHARLES A
20121 SW 112 PLACE
MIAMI, FL 33189 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: PD () Delete
Name: SULLIVAN, CHARLES A
Address: 20121 S.W. 112TH PLACE
City-St-Zip: MIAMI, FL 33189

Title: VD () Delete
Name: SULLIVAN, THERESA E
Address: 20121 S.W. 112TH PLACE
City-St-Zip: MIAMI, FL 33189

Title: SD () Delete
Name: FRITH, PAULETTE
Address: 11980 S.W. 184TH STREET
City-St-Zip: MIAMI, FL 33172

Title: TD () Delete
Name: CLEVELAND, ARLENE
Address: 12025 S.W. 186TH STREET
City-St-Zip: MIAMI, FL 33172

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:

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: CHARLES A. SULLIVAN

PD

02/01/2009

Electronic Signature of Signing Officer or Director

Date