

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008562

FILED
Jan 27, 2009
Secretary of State

Entity Name: MOUNT SINAI UNITED METHODIST CHURCH OF HALLANDALE, INC.

Current Principal Place of Business:

113 S. FEDERAL HWY
DANIA BEACH, FL 33004 US

New Principal Place of Business:

Current Mailing Address:

118 SE 1ST AVE.
DANIA BEACH, FL 33004 US

New Mailing Address:

FEI Number: 20-2889185

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENRY, ERNESTINE V
609 SW 12TH AV
DANIA BEACH, FL 33004 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: DTP () Delete
Name: HUTCHINS, WILLIE
Address: PO BOX 662
City-St-Zip: HALLANDALE, FL 33008

Title: DT () Delete
Name: BROWN, EVERETT
Address: 3324 SW 12 CT.
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: DST () Delete
Name: PARKS, CAROL
Address: 3961 NW 36 TERRACE
City-St-Zip: LAUDERDALE, FL 33309

Title: DVT () Delete
Name: SHOATS, TIA
Address: 280 KANSAS AVE.
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: T () Delete
Name: HENRY, SINDA
Address: 1455 W. 33RD WAY
City-St-Zip: FORT LAUDERDALE, FL 33311

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: CAROL PARKS

MRS.

01/27/2009

Electronic Signature of Signing Officer or Director

Date