

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008987

FILED
Apr 05, 2011
Secretary of State

Entity Name: SHAW TEMPLE AME ZION INC.

Current Principal Place of Business:

522 NW 9TH AVE.
FT. LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

504 NW 19TH AVENUE
FT. LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 65-0960045

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HARALSON, WILLIAM C
504 NW 19TH AVE.
FT. LAUDERDALE, FL 33311 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
Name: HARALSON, WILLIAM C
Address: 504 NW 19TH AVE.
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: VPD
Name: MERRELL, SARA
Address: 1511 NW 33RD AVE.
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: SD
Name: HARALSON, GWENDOLYN
Address: 504 NW 19TH AVE.
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: T
Name: TILL, ROSALIND
Address: 1511 NW 33 AVE
City-St-Zip: LAUDERHILL, FL 33311

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: WILLIAM C. HARALSON

PD

04/05/2011

Electronic Signature of Signing Officer or Director

Date