

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001236

FILED
Feb 03, 2009
Secretary of State

Entity Name: COCONUT GROVE MINISTERIAL ALLIANCE, INC.

Current Principal Place of Business:

3500 CHARLES AVE
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

3500 CHARLES AVE
MIAMI, FL 33133

New Mailing Address:

FEI Number: 02-0581059

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENTON, WILLIAMS
3500 CHARLES AVENUE
MIAMI, FL 33133 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: PCBD () Delete
Name: KENTON, WILLIAMS REV.
Address: 3500 CHARLES AVENUE
City-St-Zip: MIAMI, FL 33133

Title: TD () Delete
Name: JACKSON, JAMES REV.
Address: 3616 DAY AVE.
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: JACOBS, PORTIA REV.
Address: 3616 DAY AVE.
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: THOMPSON, G WAYNE REV
Address: 3616 DAY AVE.
City-St-Zip: MIAMI, FL 33133

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: WILLIAMS KENTON

PCBD

02/03/2009

Electronic Signature of Signing Officer or Director

_____ Date