

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001513

FILED
Apr 30, 2009
Secretary of State

Entity Name: NEW ST. MATTHEW COMMUNITY DEVELOPMENT INSTITUTE INC.

Current Principal Place of Business:

1006 S. 50TH STREET
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

1006 S. 50TH STREET
TAMPA, FL 33619

New Mailing Address:

FEI Number: 01-0745708

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARNUM, JOEL
4008 E. HENRY AVENUE
TAMPA, FL 33610 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: D () Delete
Name: JONES, KEITH
Address: 10314 N 9TH ST APT A
City-St-Zip: TAMPA, FL 33612

Title: D () Delete
Name: BARNUM, JOEL
Address: 4008 E. HENRY AVENUE
City-St-Zip: TAMPA, FL 33610

Title: D () Delete
Name: BROWN, GARRY
Address: 11007 ULSTER CT.
City-St-Zip: TAMPA, FL 3361

Title: D () Delete
Name: BOLEN, WANDA
Address: 11201 N. 22ND ST.
City-St-Zip: TAMPA, FL 33612

Title: D () Delete
Name: MILLS, VICTOR
Address: 3202 E. CAOLWELL #408
City-St-Zip: TAMPA, FL 33613

Title: D () Delete
Name: JACKSON, TRENIKA
Address: 3501 25TH AVE
City-St-Zip: TAMPA, FL 33605

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
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Title: () Change () Addition
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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: JOEL BARNUM

MR

04/30/2009

Electronic Signature of Signing Officer or Director

Date