

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002384

FILED
Mar 24, 2009
Secretary of State

Entity Name: ENCOURAGING HEARTS FOR CHRIST WORSHIP CENTER, INC.

Current Principal Place of Business:

4127 PONZA PLACE
LAKE WORTH, FL 33462

New Principal Place of Business:

1960 S. CONGRESS AVE
N/A
WEST PALM BEACH, FL 33460

Current Mailing Address:

4127 PONZA PLACE
LAKE WORTH, FL 33462

New Mailing Address:

1960 S. CONGRESS AVE
N/A
WEST PALM BEACH, FL 33460

FEI Number: 36-4525263

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, ROGER
4127 PONZA PLACE
LAKE WORTH, FL 33462 US

Name and Address of New Registered Agent:

ROBINSON, PATRICIA C P
1960 S. CONGRESS AVE
N/A
WEST PALM BEACH, FL 33460 US

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: PATRICIA C. ROBINSON

03/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROBINSON, ROGERS
Address: 4127 PONZA PLACE
City-St-Zip: LAKE WORTH, FL 33462

Title: T () Delete
Name: WILFORK, WILLIE
Address: 4127 PONZA PLACE
City-St-Zip: LAKE WORTH, FL 33462

Title: S () Delete
Name: STOKES, VERONICA
Address: 4127 PONZA PLACE
City-St-Zip: LAKE WORTH, FL 33462

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROBINSON, PATRICIA C PRESIDE
Address: 1960 S. CONGRESS AVE
City-St-Zip: WEST PALM, FL 33460

Title: T (X) Change () Addition
Name: WILFORK, WILLIE
Address: 1960 S. CONGRESS AVE
City-St-Zip: WEST PALM BEACH, FL 33460

Title: S (X) Change () Addition
Name: STOKES, VERONICA
Address: 1960 S. CONGRESS AVE
City-St-Zip: WEST PALM BEACH, FL 33460

Title: VP () Change (X) Addition
Name: ROBINSON, ROGERS
Address: 1960 S. CONGRESS AVE
City-St-Zip: WEST PALM BEACH, FL 33460

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: PATRICIA ROBINSON

P

03/24/2009

Electronic Signature of Signing Officer or Director

Date