

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010878

FILED  
Feb 28, 2009  
Secretary of State

Entity Name: THE ARABIC CHURCH OF WEST PALM BEACH, INC.

## Current Principal Place of Business:

1815 FOREST HILL BLVD  
WEST PALM BEACH, FL 33406 US

## New Principal Place of Business:

## Current Mailing Address:

1815 FOREST HILL BLVD  
WEST PALM BEACH, FL 33406 US

## New Mailing Address:

712 PARKWAY CT  
GREENACRES, FL 33413 US

FEI Number: 77-0619419

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GERGES, GERGES Y  
4382 SUSSEX AVE  
LAKE WORTH, FL 33461 US

## Name and Address of New Registered Agent:

GERGES, GERGES Y  
712 PARKWAY CT  
GREENACRES, FL 33413 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: GERGES GERGES

02/28/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: GERGES, GERGES Y  
Address: 4382 SUSSEX AVE  
City-St-Zip: LAKE WORTH, FL 33461

Title: D ( ) Delete  
Name: MOSES, EMAD  
Address: 809 23RD AVENUE NORTH  
City-St-Zip: LAKE WORTH, FL 33460

Title: DS ( ) Delete  
Name: MOUSSA, KAMEL F  
Address: 1113 NORTH C STREET  
City-St-Zip: LAKE WORTH, FL 33460

Title: D (X) Delete  
Name: BOUTROS, NORA  
Address: 1020 SOUTH K STREET  
City-St-Zip: LAKE WORTH, FL 33460

Title: D (X) Delete  
Name: MATTA, SHAWKY G  
Address: 1720 7TH AVE. N.  
City-St-Zip: LAKE WORTH, FL 33460

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: GERGES, GERGES Y  
Address: 712 PARKWAY CT  
City-St-Zip: GREENACRES, FL 33413 US

Title: D (X) Change ( ) Addition  
Name: MADONNA, IBRAHIM  
Address: 712 PARKWAY CT  
City-St-Zip: GREENACRES, FL 33413

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: GERGES GERGES

DP

02/28/2009

Electronic Signature of Signing Officer or Director

Date