2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# N04000005500

Entity Name: EMPOWERMENT CHURCH, INC.

Current Principal Place of Business:

828 NE 160TH ST
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

828 NE 160TH ST
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MESIDOR, AUDA T BISHOP
828 NE 160TH ST
NORTH MIAMI BEACH, FL 33162 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:	P	( ) Delete
Name:	MESIDOR, AUDA T BISHOP	
Address:	828 NE 160TH STREET	
City-St-Zip:	N. MIAMI BEACH, FL 33162	
Title:	CD	( ) Delete
Name:	MESIDOR, SAINT ARMAND REV.	
Address:	828 NE 160TH ST	
City-St-Zip:	N MIAMI BEACH, FL 33162	
Title:	ACD	( ) Delete
Name:	LOCKHART, MARSHA LEE MIN.	
Address:	11994 SW 15TH	
City-St-Zip:	PEMBROKE PINES, FL 33025	
Title:	SD	( ) Delete
Name:	ALTIDOR-PIERRE, MARIE MAGALIE DEACONE	
Address:	814 NE 160TH ST	
City-St-Zip:	NORTH MIAMI BEACH, FL 33162	
Title:	S	( ) Delete
Name:	RICHMOND, MAUD-LINE	
Address:	610 NE 178TH STREET	
City-St-Zip:	NORTH MIAMI BEACH, FL 33162	
Title:	TD	( ) Delete
Name:	MARCELIN, GARY MIN.	
Address:	450 NE 129TH ST	
City-St-Zip:	NORTH MIAMI, FL 33161	

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:	
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: AUDA T MESIDOR BISH 04/29/2008

Electronic Signature of Signing Officer or Director — Date