

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007986

FILED  
Apr 29, 2008  
Secretary of State

**Entity Name:** SHILOH FAMILY WORSHIP CENTER OF THE PALM BEACHES, INC

**Current Principal Place of Business:**

2620 N. AUSTRALIAN AVENUE - SUITE 1001  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 17498  
WEST PALM BEACH, FL 33416

**New Mailing Address:**

**FEI Number:** 20-1489693

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILLIAMS, VERNITA C ESQ.  
9970 NW 51ST LANE  
MIAMI, FL 33178 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: GARCIA, TANNYA N  
Address: 4945 PIMLICO CT.  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: PD ( ) Delete  
Name: WRIGHT, ANTOINNE J  
Address: 3470 NW 171ST TERRACE  
City-St-Zip: MIAMI, FL 33056

Title: VD ( ) Delete  
Name: JOHNSON, SYLVESTER JR.  
Address: 11511 NW 15TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D ( ) Delete  
Name: BYRD, ANNIE C  
Address: 1940 NW 119TH ST., APT. 803  
City-St-Zip: MIAMI, FL 33167

Title: SD ( ) Delete  
Name: BENNETT, ROSALIND  
Address: 719 59 ST  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D ( ) Delete  
Name: JAMES, KEVIN DR.  
Address: 10422 - A53RD COURT NORTH  
City-St-Zip: JUPITER, FL 33478

**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: VERNITA C. WILLIAMS

ATTY

04/29/2008

Electronic Signature of Signing Officer or Director

Date