

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011667

FILED
Jul 08, 2008
Secretary of State

Entity Name: ADAMS TABERNACLE OF FAITH A.M.E. CHURCH, INC.

Current Principal Place of Business:

16205 SW 49TH COURT
MIRAMAR, FL 33027

New Principal Place of Business:

Current Mailing Address:

16205 SW 49TH COURT
MIRAMAR, FL 33027

New Mailing Address:

FEI Number: 20-2098530 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BODISON, JOHN L
12885 SW 189TH STREET
MIAMI, FL 33177 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: REV. () Delete
Name: PAYNE, JR., MELVIN PASTOR
Address: 16205 SW 49TH COURT
City-St-Zip: MIRAMAR, FL 33027

Title: MS. () Delete
Name: COOPER, AURORA STEWARD
Address: 14697 SW 33 COURT
City-St-Zip: MIRAMAR, FL 33027

Title: MR. () Delete
Name: KINLOCH, VINCENT TRUSTEE
Address: 950 88 WAY
City-St-Zip: MIRAMAR, FL 33025

Title: MR. () Delete
Name: PERKINS, TRACY TRUSTEE
Address: 7661 INDIGO ST.
City-St-Zip: MIRAMAR, FL 33023

Title: MRS. () Delete
Name: HALL, DIANE TRUSTEE
Address: 20011 NW 8TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MR. () Delete
Name: MOORE, WILLIE STEWARD
Address: 1960 NW 191 TERRACE
City-St-Zip: MIAMI GARDENS, FL 33056

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: MS. (X) Change () Addition
Name: ANN, KNOWLES TRUSTEE
Address: 3831 NW 174 STREET
City-St-Zip: MIAMI, FL 33055

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: MELVIN PAYNE, JR.

Electronic Signature of Signing Officer or Director

REV.

07/08/2008

_____ Date