

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04483

FILED
Apr 28, 2009
Secretary of State

Entity Name: GETHSEMANE MISSIONARY BAPTIST CHURCH OF WEST HOLLYWOOD, FLORIDA, FL.

Current Principal Place of Business:

5212 S.W. 17TH STREET
WEST HOLLYWOOD, FL 33023 US

New Principal Place of Business:

Current Mailing Address:

5212 S.W. 17TH STREET
WEST HOLLYWOOD, FL 33023 US

New Mailing Address:

FEI Number: 65-0073979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOWARD, ROBERTS
5120 SW 22ND ST
HOLLYWOOD, FL 33023 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: PD () Delete
Name: ROBERTS, HOWARD
Address: 5120 SW 22ND ST
City-St-Zip: HOLLYWOOD, FL 33023

Title: VD () Delete
Name: HARDEMON, J C
Address: 5304 PLUNKETT ST
City-St-Zip: HOLLYWOOD, FL 33021

Title: S () Delete
Name: LEE, MAMIE J
Address: 2965 NW 206 ST.
City-St-Zip: MIAMI, FL 33056

Title: T () Delete
Name: DAVIS, HERMAN
Address: 5008 SW 21 ST.
City-St-Zip: HOLLYWOOD, FL 33023

Title: MT () Delete
Name: RAFORD, CLARENCE SR
Address: 5201 WILEY ST
City-St-Zip: HOLLYWOOD, FL 33020

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:

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: HOWARD ROBERTS

PD

04/28/2009

Electronic Signature of Signing Officer or Director

Date