## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000004207

FILED Apr 30, 2009 Secretary of State

Entity Name: GOD'S WAY ASSEMBLY FAITH CATHEDRAL, INC

Current Principal Place of Business: New Principal Place of Business:

2170 OPA-LOCKA BLVD 12961 NE 14 AVENUE

OPA-LOCKA, FL 33054 US NORTH MIAMI, FL 33161 US

Current Mailing Address: New Mailing Address:

P.O. BOX 680817

N. MIAMI, FL 33168 US

FEI Number: 56-2513560 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JACKSON, KARL A REV
430 N.W. 123 STREET
430 N.W. 123 STREET

430 N.W. 123 STREET 430 N.W. 123 STREET NORTH MIAMI, FL 33168 US NORTH MIAMI, FL 33168 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: KARL A JACKSON, SR 04/30/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 JACKSON, KARL A REV
 Name:
 JACKSON, SR, KARL A REV

 Address:
 430 N.W. 123 STREET
 Address:
 430 N.W. 123 STREET

 City-St-Zip:
 NORTH MIAMI, FL 33168
 City-St-Zip:
 NORTH MIAMI, FL 33168

Title: VSD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 JACKSON, RITA
 Name:

 Address:
 430 N.W. 123 STREET
 Address:

 City-St-Zip:
 NORTH MIAMI, FL 33168
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MANSON, CHRISTOPHER
 Name:

 Address:
 435 N.W. 124 STREET
 Address:

 City-St-Zip:
 NORTH MIAMI, FL 33168
 City-St-Zip:

Title: TD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 CELESTINE, SHIBA R
 Name:

 Address:
 238 N.W. 59 TERRACE
 Address:

 City-St-Zip:
 MIAMI, FL 33127
 City-St-Zip:

 Name:
 BUTLER, BARBARA
 Name:
 MEZADIEU, ST. JUSTE

 Address:
 632 N.W. 179 STREET
 Address:
 186 N.W. 57 STREET

 City-St-Zip:
 MIAMI GARDENS, FL 33169
 City-St-Zip:
 MIAMI, FL 33127

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: RITA JACKSON VP 04/30/2009