

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007204

FILED
Apr 27, 2009
Secretary of State

Entity Name: STARLIGHT HOLY TEMPLE CHURCH INC.

Current Principal Place of Business:

1085 NW 62 STREET
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

1085 NW 62 STREET
MIAMI, FL 33150

New Mailing Address:

FEI Number: 20-3237283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURRAY, JIMMY L
1085 NW 62 STREET
MIAMI, FL 33150 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: MURRAY, JIMMY L
Address: 954 NW 77 ST
City-St-Zip: MIAMI, FL 33150

Title: AA () Delete
Name: JOSEPH, TIFFANY
Address: 3620 SW 166 AVE
City-St-Zip: MIRAMAR, FL 33027

Title: D () Delete
Name: LEWIS, ERNEST
Address: 2226 NW 66 ST
City-St-Zip: MIAMI, FL 33147

Title: TD () Delete
Name: WILLIAMS, GLADYS
Address: 10850 NW 10 ST
City-St-Zip: MIAMI, FL 33168

Title: D () Delete
Name: MURRAY, MARY
Address: 954 NW 77 ST
City-St-Zip: MIAMI, FL 33150

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: JIMMY LEE MURRAY

PD

04/27/2009

Electronic Signature of Signing Officer or Director

Date