2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008504

FILED May 01, 2009 Secretary of State

Entity Name: THE WEST COAST ANNUAL CONFERENCE OF THE AFRICAN METHODIST EPISCOPAL CHURCH,

INC

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

101 E UNION STREET SUITE 301 JACKSONVILLE, FL 32202

Current Mailing Address:

New Mailing Address:

101 E UNION STREET SUITE 301 JACKSONVILLE, FL 32202

FEI Number: 59-3299471 F

FEI Number Applied For () FEI Number Not Applicable ()

Certificate of Status Desired ()

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:

Name and Address of New Registered Agent:

YOUNG, MCKINLEY 101 E UNION STREET SUITE 301 JACKSONVILLE, FL 32202 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD () Delete Title: P (X) Change () Addition Name: YOUNG, MCKINLEY Name: YOUNG, MCKINLEY
Address: 101 E UNION STREET SUITE 301 Address: 101 E UNION STREET SUITE 301
City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: JACKSONVILLE, FL 32202

Title: D () Delete Title: () Change () Addition Name: DENMARK, JEROME Name:

 Address:
 5464 MICCO DR
 Address:

 City-St-Zip:
 ORLANDO, FL 32839
 City-St-Zip:

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

 Name:
 ANDREWS, THEODORE
 Name:
 GREEN, HENRY

 Address:
 PO BOX 291462
 Address:
 2386 SW 102ND AVE.

 City-St-Zip:
 TAMPA, FL 33687
 City-St-Zip:
 MIRAMAR, FL 33025

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

 Name:
 LEMON, F BERNARD
 Name:

 Address:
 PO BOX 880307
 Address:

 City-St-Zip:
 PT ST LUCIE, FL 34988
 City-St-Zip:

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

 Name:
 THOMAS, DOUGLAS M
 Name:

 Address:
 223 C STREET
 Address:

 City-St-Zip:
 LAKE WALES, FL 33853
 City-St-Zip:

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

 Name:
 Name:
 HONORS, JAMES

 Address:
 Address:
 2191 MALACHITE DRIVE

 City-St-Zip:
 City-St-Zip:
 LAKELAND, FL 33810

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: MCKINLEY YOUNG P 05/01/2009