

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003654

FILED
Mar 29, 2007
Secretary of State

Entity Name: DISTINGUISHED PEOPLE FOR CHRIST, INC.

Current Principal Place of Business:

2161 RUTLAND ST.
OPA LOCKA, FL 33054

New Principal Place of Business:

Current Mailing Address:

2161 RUTLAND ST.
OPA LOCKA, FL 33054

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, DEVIN
2161 RUTLAND ST.
OPA LOCKA, FL 33054 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: P () Delete
Name: BROWN, DEVIN
Address: 2161 RUTLAND ST.
City-St-Zip: OPA LOCKA, FL 33054

Title: S () Delete
Name: ERVIN, GUSSIE
Address: 4715 NW 10TH AVE.
City-St-Zip: MIAMI, FL 33127

Title: T () Delete
Name: LANE, JUANITA
Address: 4821 NW 8TH AVE.
City-St-Zip: MIAMI, FL 33127

Title: D () Delete
Name: MIMS, FRED
Address: 1900 SANS SOUCI BLVD., #213
City-St-Zip: MIAMI, FL 33181

Title: D () Delete
Name: MIKELL, BURNICE
Address: 1864 NW 93RD TERR.
City-St-Zip: MIAMI, FL 33147

Title: D (X) Delete
Name: TURNER, ANTHONY
Address: 8921 NW 177TH TERR.
City-St-Zip: MIAMI, FL 33018

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: D (X) Change () Addition
Name: BROWN, MENDELL
Address: 820 WASHINGTON STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DEVIN D BROWN

P

03/29/2007

Electronic Signature of Signing Officer or Director

Date