

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006898

FILED
Feb 26, 2009
Secretary of State

Entity Name: GOATABLE CHURCH OF GOD MINISTRIES, INC.

Current Principal Place of Business:

540 NW 87TH STREET
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

540 NW 87TH STREET
MIAMI, FL 33150

New Mailing Address:

FEI Number: 34-2058387

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CHARLES, ALAIN PH.D
540 NW 87TH 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: P () Delete
Name: CHARLES, ALAIN PH.D
Address: 540 NW 87TH STREET
City-St-Zip: MIAMI, FL 33150

Title: VP () Delete
Name: CHARLOT, ESTUVERNE
Address: 1170 NW 91ST
City-St-Zip: MIAMI, FL 33150

Title: S () Delete
Name: FLEURIME, EMANE
Address: 13720 NE MIAMI CT
City-St-Zip: MIAMI, FL 33161

Title: T () Delete
Name: CHARLES, MARIE M
Address: 540 NW 87TH STREET
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:

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: ALAIN CHARLES

P

02/26/2009

Electronic Signature of Signing Officer or Director

Date