

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009720

FILED
May 06, 2008
Secretary of State

Entity Name: GREATER FLORIDA UNITED COGIC WORLDWIDE MINISTRIES INC. WOMEN DEPT.

Current Principal Place of Business:

2821 NW 15 STREET
FT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

101 KENTUCKY AVENUE
FT LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 20-5584539 **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:

THOMAS, HENRIETTA
101 KENTUCKY AVE
FT LAUDERDALE, FL 33312 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: THOMAS, HENRIETTA
Address: 2821 NW 15 STREET
City-St-Zip: FT LAUDERDALE, FL 33311

Title: S () Delete
Name: SMITH, KAREN
Address: 2821 NW 15 STREET
City-St-Zip: FT LAUDERDALE, FL 33311

Title: D () Delete
Name: BELLAMY, LARRY E
Address: 2821 NW 15 STREET
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: V () Delete
Name: BELLAMY, GEORGIE L
Address: 2821 NW 15 STREET
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: T () Delete
Name: JOHNSON, FELICIA
Address: 2821 NW 15 STREET
City-St-Zip: FORT LAUDERDALE, FL 33311

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: HENRIETTA THOMAS

P

05/06/2008

Electronic Signature of Signing Officer or Director

Date