

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06448

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** MARTIN MEMORIAL AFRICAN METHODIST EPISCOPAL CHURCH, INC.

**Current Principal Place of Business:**

14700 LINCOLN BLVD.  
MIAMI, FL 331767432

**New Principal Place of Business:**

**Current Mailing Address:**

14700 LINCOLN BLVD.  
MIAMI, FL 331767432

**New Mailing Address:**

**FEI Number:** 59-2618835      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

EVERETT, CYNTHIA A  
7700 NORTH KENDALL DRIVE  
STE. 703  
MIAMI, FL 33156 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: PA  
Name: REED, ANTHONY REV. DR  
Address: 14740 LINCOLN BLVD.  
City-St-Zip: MIAMI, FL 33176

Title: S  
Name: GILES, REGINA M  
Address: 11250 WASHINGTON BLVD.  
City-St-Zip: MIAMI, FL 33176

Title: S  
Name: GILLIARD, INEZ  
Address: 10960 SW 177TH STREET  
City-St-Zip: MIAMI, FL 33157

Title: TRUS  
Name: BROWN, ANTHONY  
Address: 16601 SW 87TH COURT  
City-St-Zip: MIAMI, FL 33157

I hereby 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 all other like empowered.

SIGNATURE: JACQUELINE C. JOHNSON-HODGE

OM

02/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date