



2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2008 8:00 am
Secretary of State

03-31-2008 90031 025 ****61.25

DOCUMENT # N07000001188 1. Entity Name MIRIAM'S HOUSE INC					
Principal Place of Business 4301 S PLEASANT GROVE RD INVERNESS, FL 34452			Mailing Address 4301 S PLEASANT GROVE RD INVERNESS, FL 34452 1104 Turner Camp Rd Inverness, FL 34453		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address 1104 Turner Camp Rd Suite, Apt. #, etc.			
City & State Inverness FL		City & State Inverness FL		4. FEI Number 59-3586104	
Zip 34453		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TROWBRIDGE, TAMMY-S 4301 S PLEASANT GROVE RD INVERNESS, FL 34452				7. Name and Address of New Registered Agent Name Teresa Alexander Street Address (P.O. Box Number is Not Acceptable) 1104 Turner Camp Road City Inverness FL Zip Code 34453	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>J Alexander</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE P NAME ALEXANDER, DOUGLAS STREET ADDRESS 1140 TURNER CAMP RD CITY-ST-ZIP INVERNESS, FL 34453	<input checked="" type="checkbox"/> Delete		TITLE President NAME Alexander, Teresa STREET ADDRESS 1104 Turner Camp Rd CITY-ST-ZIP Inverness, FL 34453	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VP NAME TROWBRIDGE, TAMMY STREET ADDRESS 4301 S PLEASANT GROVE RD CITY-ST-ZIP INVERNESS, FL 34452	<input checked="" type="checkbox"/> Delete		TITLE VP NAME Alexander, Douglas STREET ADDRESS 1104 Turner Camp Rd CITY-ST-ZIP Inverness FL 34453	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE SEC NAME ALEXANDER, DOUGLAS STREET ADDRESS 1140 TURNER CAMP RD CITY-ST-ZIP INVERNESS, FL 34452	<input checked="" type="checkbox"/> Delete		TITLE Sec NAME Dewitt Mayne STREET ADDRESS 1104 Turner Camp Rd CITY-ST-ZIP Inverness, FL 34453	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE O NAME THOMAS, DAMIEN STREET ADDRESS 2356 FOREST DR CITY-ST-ZIP INVERNESS, FL 34453	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE O NAME DARIEN, LILLIAN STREET ADDRESS 3579 N TAMARISK AVE CITY-ST-ZIP BEVERLY HILLS, FL 34465	<input checked="" type="checkbox"/> Delete		TITLE O NAME Phyllis Bell STREET ADDRESS 110 Hunting Lodge Drive CITY-ST-ZIP Inverness FL 34453	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE O NAME LIEBERMAN, MELISSA STREET ADDRESS 861 W COLBERT CT CITY-ST-ZIP BEVERLY HILLS, FL 34465	<input checked="" type="checkbox"/> Delete		TITLE O NAME Mike Mathena STREET ADDRESS 4301 S. Pleasant Grove Rd CITY-ST-ZIP Inverness, FL 34452	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>J Alexander</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <u>352-344-2425</u> <small>Daytime Phone #</small>	



ATTACHMENT 4055503

#N07000001/88

Church Without Walls of Inverness

Senior Pastors, Douglas & Teresa Alexander Sr.

1140 E. Turner Camp Rd. Inverness, FL 34453

Phone: (352) 344-2425 Fax: (352) 344-0222

March 28, 2008

To: Division of Corporation

P. O Box 1500

Tallahassee, Florida 32302-1500

To Whom It May Concern:

Attached is the Annual Report for the Miriam's House.

There will be a change of name for the facilities, it will be in effect in several weeks.

If you have any questions, you could reach us at (352) 344-2425 and our office hours are
Tues.- Fri. 8am-4pm.

Thank you for your cooperation with this matter.

Lynda Simmons
Carmen Velez

CWOW

Finance Dept.

Lynda Simmons

Carmen Velez

Multi-Cultural and Non-Denominational Church