

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005961

FILED
Apr 24, 2009
Secretary of State

Entity Name: ST JOHN AFRICAN METHODIST EPISCOPAL CHURCH, INC.

Current Principal Place of Business:

595 NW 24 AVE.
POMPANO BEACH, FL 33066

New Principal Place of Business:

Current Mailing Address:

595 NW 24 AVE.
POMPANO BEACH, FL 33066

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:

HARDY, GEORGE
595 NW 24 AVE.
POMPANO BEACH, FL 33066 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: DP () Delete
Name: GLOVER, VERNELL W.
Address: 3200 NW 5 TER., UNIT 36
City-St-Zip: POMPANO BEACH, FL 33064

Title: DV () Delete
Name: BOYD, WADRINE
Address: 2532 NW 4 CT.
City-St-Zip: POMPANO BEACH, FL 33069

Title: DS () Delete
Name: HARDY, MARY
Address: 2829 SW 5TH ST.
City-St-Zip: FT. LAUDERDALE, FL 33312

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:

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: MARY HARDY

DS

04/24/2009

Electronic Signature of Signing Officer or Director

Date