2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N07000006867



Feb 08, 2008 8:00 am Secretary of State

FILED

1. Entity Nam GRANT 1		LE A.M.E. CHUF	RCH, INCORPORATE	D			02-08-2008	3 90028 02	23 ****6	1.25	
577 MARTIN LUTHER KING DRIVE P.O. BO			Mailing Address P.O. BOX 370 CHIPLEY, FL 32428			l leamer en e		ETTA OERRI EERIYE OTA	II 19110 AÎNN 189	In 61 an 1981	
Principal Place of Business - No P.O. Box # Mailing Address											
Suite, Apt. #, etc. Suite, Apt. #, etc.						01232008	Chg-NP	CR2E037	7 (12/06)		
City & State		City & State		·	4. FEI Number 59 - 3	137965	5	_ 	oplied For ot Applicable		
Zip	Žip Country		Zip	Country		5. Certificate of Status Desired \$8.75 Additional Fee Required					
6. Name and Address of Current Registers			Registered Agent				7. Name and Address of New Registered Agent				
RPOMAL I	ADDV			Name	8	•					
BROWN, LARRY 1671 MONROE SHEFFIELD ROAD CHIPLEY, FL 32428				Stree	Street Address (P.O. Box Number is Not Acceptable)						
				City		······································			Zip Code	Ð	
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8. The above	e named entity sub tions of registered	bmits this statement for (Onent	the purpose of changing its r	egistered office	or register	ed agent, or both	n, in the State of F	Florida. I am fa	ımiliar with,	and accept	
(Cobagai	'i)	Jageni.	\circ								
<u></u>	Kari	- rein	1 2 Bu	orn_				2-1-0	R		
SIGNATURE		rited name of registered agent		Registered Agent sig		when repetition		DATE	<u>o </u>		
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	Filing Fee is Due by May		9. Election Cam Trust Fund Co	_	9 🗆	\$5.00 May Be Added to Fees		Make check orlda Departr			
10.			Trust Fund Co	_		Added to Fees		orlda Departr	ment of St	ate	
TITLE .	Due by May	1, 2008 OFFICERS AND DIR	Trust Fund Co	ontribution.		Added to Fees	Flo	ERS AND DIR	ment of St	ate	
TITLE .	T ANDREWS, T	OFFICERS AND DIR	Trust Fund Co	11. TITLE NAME		Added to Fees	Flo	ERS AND DIR	ment of St	10	
TITLE . NAME STREET ADDRESS	T ANDREWS, T 1173 FARME	OFFICERS AND DIR	Trust Fund Co	11. TITLE NAME STREET ADDRES		Added to Fees	Flo	ERS AND DIR	ment of St	10	
NAME STREET ADDRESS CITY-ST-ZIP	T ANDREWS, T 1173 FARME CHIPLEY, FL	OFFICERS AND DIR	Trust Fund Co	11. TITLE NAME		Added to Fees	Flo	ERS AND DIR	ment of St	10	
TITLE . NAME STREET ADDRESS CITY-ST-ZIP TITLE	T ANDREWS, T 1173 FARME CHIPLEY, FL S	OFFICERS AND DIR	Trust Fund Co	11. TITLE NAME STREET ADDRES CITY-ST-ZIP		Added to Fees	Flo	orida Departr	ment of St	10	
TITLE . NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	T ANDREWS, T 1173 FARME CHIPLEY, FL S CAMPBELL, N	OFFICERS AND DIFFICERS AND DIF	Trust Fund Co	TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME	s	Added to Fees	Flo	orida Departr	THEAT OF ST	10 Addition	
TITLE . NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	T ANDREWS, T 1173 FARME CHIPLEY, FL S CAMPBELL, 1 1247 CAMPB	OFFICERS AND DIR	Trust Fund Co	TILE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES STREET ADDRES	s	Added to Fees	Flo	orida Departr	THEAT OF ST	10 Addition	
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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.

amphe SIGNATURE: OFFICER OR DIRECTOR