

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008330

FILED  
Feb 02, 2009  
Secretary of State

**Entity Name:** CHURCH OF UNITY APOSTOLIC WORSHIP CENTER, INC.

**Current Principal Place of Business:**

5710 NORTH MIAMI AVENUE  
MIAMI, FL 33127

**New Principal Place of Business:**

**Current Mailing Address:**

5710 NORTH MIAMI AVENUE  
MIAMI, FL 33127

**New Mailing Address:**

**FEI Number:** 26-1080921

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GILMORE-SMITH, LOIS  
5710 NORTH MIAMI AVENUE  
MIAMI, FL 33127 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: GILMORE-SMITH, LOIS  
Address: 5710 NORTH MIAMI AVENUE  
City-St-Zip: MIAMI, FL 33127

Title: S ( ) Delete  
Name: GUERRERO, BRANDY  
Address: 5710 NORTH MIAMI AVENUE  
City-St-Zip: MIAMI, FL 33127

Title: T ( ) Delete  
Name: SMITH, MONTY L  
Address: 5710 NORTH MIAMI AVENUE  
City-St-Zip: MIAMI, FL 33127

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: LEE, VERA A  
Address: 3221 NW 11TH AVENUE  
City-St-Zip: MIAMI, FL 33127

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: LOIS GILMORE-SMITH

PD

02/02/2009

Electronic Signature of Signing Officer or Director

Date