

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

8/8/2008-90016-002-\$70.00-\$70.00

DOCUMENT # N07C00011152 1. Entity Name SAINT LUKE AFRICAN METHODIST EPISCOPAL CHURCH, INC.						FILED 08 SEP 24 P11 2:34 DEPARTMENT OF STATE TALLAHASSEE, FLORIDA 																																																																	
Principal Place of Business 4401 GARDEN AVE. WEST PALM BEACH FL 33405 US				Mailing Address 4401 GARDEN AVE. WEST PALM BEACH FL 33405 US																																																																			
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.																																																																			
City & State				City & State																																																																			
Zip		Country		Zip		Country																																																																	
4. FEI Number				Applied For ☐ Not Applicable																																																																			
5. Certificate of Status Desired ☒				\$8.75 Additional Fee Required																																																																			
6. Name and Address of Current Registered Agent JOHNSON, RHEBA B PASTOR 338 EAST ILEX DR LAKE PARK FL 33403				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																			
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>RHEBA B. JOHNSON</u> <u>Rheba B. Johnson</u> <u>8-4-08</u> Signature, typed or printed name of registered agent and title (if applicable). (Typed name of Agent signature required when not filing.) DATE																																																																							
FILE NOW: FEE IS \$61.25 Due By September 3, 2008				9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees																																																																	
Make Check Payable to Florida Department of State																																																																							
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="4" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="4" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">NAME</td> <td style="width: 15%;">STREET ADDRESS</td> <td style="width: 25%;">CITY-ST-ZIP</td> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">NAME</td> <td style="width: 15%;">STREET ADDRESS</td> <td style="width: 25%;">CITY-ST-ZIP</td> </tr> <tr> <td></td> <td>PRES</td> <td>JOHNSON, RHEBA B PASTOR</td> <td>4401 GARDEN AVE. WEST PALM BEACH FL 33405</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>VP</td> <td>WILSON, CHARLIE SR.</td> <td>4401 GARDEN AVE. WEST PALM BEACH FL 33405</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>SEC</td> <td>JAMES, TAMMY</td> <td>4401 GARDEN AVE. WEST PALM BEACH FL 33405</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>TREA</td> <td>WILSON, MARGARET</td> <td>4401 GARDEN AVE. WEST PALM BEACH FL 33405</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>								10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		PRES	JOHNSON, RHEBA B PASTOR	4401 GARDEN AVE. WEST PALM BEACH FL 33405						VP	WILSON, CHARLIE SR.	4401 GARDEN AVE. WEST PALM BEACH FL 33405						SEC	JAMES, TAMMY	4401 GARDEN AVE. WEST PALM BEACH FL 33405						TREA	WILSON, MARGARET	4401 GARDEN AVE. WEST PALM BEACH FL 33405																				
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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 address, with all other like and empowered.																																																																							
SIGNATURE: <u>Rheba B. Johnson</u> <u>RHEBA B. JOHNSON</u> <u>8-4-08</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #																																																																							