

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 05, 2012
Secretary of State

DOCUMENT# N07000011152

Entity Name: SAINT LUKE AFRICAN METHODIST EPISCOPAL CHURCH, INC.**Current Principal Place of Business:**4401 GARDEN AVE.
WEST PALM BEACH, FL 33405 US**New Principal Place of Business:****Current Mailing Address:**4401 GARDEN AVE.
WEST PALM BEACH, FL 33405 US**New Mailing Address:****FEI Number:** 45-0577220**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**JOHNSON, RHEBA B PASTOR
338 EAST ILEX DR
LAKE PARK, FL 33403 US**Name and Address of New Registered Agent:**COLLINS, JACQUELINE PASTOR
2250 N.W. PADOVA ST.
PORT ST. LUCIE, FL 34986 US

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: JACQUELINE COLLINS

04/05/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: COLLINS, JACQUELINE PASTOR
Address: 4401 GARDEN AVE.
City-St-Zip: WEST PALM BEACH, FL 33405 US

Title: VP
Name: HODGES, DOROTHY
Address: 4401 GARDEN AVE.
City-St-Zip: WEST PALM BEACH, FL 33405 US

Title: SEC
Name: TIMMONS, ALMA
Address: 4401 GARDEN AVE.
City-St-Zip: WEST PALM BEACH, FL 33405 US

Title: TREA
Name: TIMMONS, JERRY
Address: 4401 GARDEN AVE.
City-St-Zip: WEST PALM BEACH, FL 33405 US

I hereby 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 all other like empowered.

SIGNATURE: JACQUELINE COLLINS

PRES

04/05/2012

Electronic Signature of Signing Officer or Director

Date