

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001011

FILED  
Jul 24, 2009  
Secretary of State

**Entity Name:** SCHEKINAH CHURCH MINISTRIES INC.

**Current Principal Place of Business:**

3264 S UNIVERSITY DRIVE  
MIRAMAR, FL 33025

**New Principal Place of Business:**

**Current Mailing Address:**

8529 WINDSOR DR  
MIRAMAR, FL 33025 US

**New Mailing Address:**

**FEI Number:** 26-1936684 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

LOUIS, JOSUE REV  
8529 WINDSOR DRIVE  
MIRAMAR, FL 33025 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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: LOUIS, JOSUE REV  
Address: 8529 WINDSOR DR  
City-St-Zip: MIRAMAR, FL 33025

Title: S ( ) Delete  
Name: JOSEPH, MARIE L  
Address: 6405 SW 22ND CT  
City-St-Zip: MIRAMAR, FL 33023

Title: T ( ) Delete  
Name: DELVA, MARIE A  
Address: 9471 PAM CIRCLE N  
City-St-Zip: PEMBROKE, FL 33025

Title: D ( ) Delete  
Name: JOSEPH, LADY  
Address: 3300 GARNET RD  
City-St-Zip: MIRAMAR, FL 33025

Title: D ( ) Delete  
Name: LEO, HYRMA  
Address: 3500 ISLAND DR  
City-St-Zip: MIRAMAR, FL 33023

Title: D ( ) Delete  
Name: JEAN-SIMON, GERARD  
Address: 3264 S UNIVERSITY DRIVE  
City-St-Zip: MIRAMAR, FL 33025

**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:

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: JOSUE LOUIS

PD

07/24/2009

Electronic Signature of Signing Officer or Director

Date